

Agency Requests for Building Code Compliance Verification

We have received a request from an agency for building and/or zoning code compliance. In order to process such agency requests this form must be completed and returned with any required information and \$90.00 Compliance Verification fee.

Site Address: _____

Program Name: _____ Contact Name: _____

Contact Phone: _____ Contact Email: _____

Describe Proposed _____

Use of Space: _____

Describe Previous _____

Use of Space: _____

License allows:

(Check all that apply)

- | | |
|-----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> Residential board and care facility | <input type="checkbox"/> Social rehabilitation facility |
| <input type="checkbox"/> Assisted living facility | <input type="checkbox"/> Alcohol and drug center |
| <input type="checkbox"/> Halfway house | <input type="checkbox"/> Child care facility |
| <input type="checkbox"/> Group home | <input type="checkbox"/> Children 2 1/2 years or younger |
| <input type="checkbox"/> Congregate care facility | <input type="checkbox"/> Adult day care facility |
| <input type="checkbox"/> 24 hour care | <input type="checkbox"/> Salon or barbershop |
| <input type="checkbox"/> Less than 24 hour care | |
| <input type="checkbox"/> All occupants are capable of responding to an emergency situation without assistance | |
| <input type="checkbox"/> Some occupants may not be capable of responding to an emergency situation without assistance | |
| <input type="checkbox"/> More than 16 persons served | Number of people: _____ |
| <input type="checkbox"/> 6-16 persons served | |
| <input type="checkbox"/> 5 or fewer persons served | |

Check the applicable category below. Submit this form along with the additional information required for the appropriate category.

- No change of use group category, no alterations or expansion of space.**
 - Submit this form and the agency request form.
- No change of use group category. An alteration or expansion of space is proposed.**
 - Submit this form and the agency request form.
- No change of use group category, no alterations or expansion of space.**
 - Prior to completion of the interagency request form, a MN licensed architect must prepare a code summary and plans for the work proposed. A building permit

application must be made, plans reviewed and approved, a permit issued, work inspected and a certificate of occupancy issued.

Change of use group category, no alterations or expansion of space proposed.

- Prior to completion of the interagency request form, a MN licensed architect must prepare a code summary to be submitted for review. A building permit application must be made for the change of use, the site inspected and a certificate of occupancy issued for the new use.

Change of use group category, alteration and/or expansion proposed.

- Prior to completion of the interagency request form, a MN licensed architect must prepare a code summary and plans for the work proposed. A building permit application must be made, plans reviewed and approved, a permit issued, work inspected and a certificate of occupancy issued.

New construction.

- Prior to completion of the interagency request form, a MN licensed architect must prepare a code summary and plans for the work proposed. A building permit application must be made, plans reviewed and approved, a permit issued, work inspected and a certificate of occupancy issued.

By signing below, I confirm that the information provided herein is complete and accurate.

Signature

Print Name

Date