

City of Spicer

Window/Door Changeout Self-Certification Form

Yes\_\_\_\_\_ No\_\_\_\_\_ Is the required opening size for the new window/door the same as the one being removed/replaced?

Yes\_\_\_\_\_ No\_\_\_\_\_ Is the nailing flange caulked to the wall?  
(MN Energy code 7672.0600, Subpart 8)

Yes\_\_\_\_\_ No\_\_\_\_\_ Has drip cap been installed?  
(IRC R703.8, Item 1)

Yes\_\_\_\_\_ No\_\_\_\_\_ Is safety glazing installed within 24 inches of door opening?  
(2000 IRC Sectio 308.4, Item 6)

Yes\_\_\_\_\_ No\_\_\_\_\_ Is safety glazing installed if the window is within a bathtub/shower enclosure?  
(2000 IRC Section 308.4, Item 5)

Yes\_\_\_\_\_ No\_\_\_\_\_ Is safety glazing installed if the window falls within five feet of the top or bottom of a stairway or landing?  
(2000 IRC Section R308.4, Item 10)

I understand the Building Official or his designated Deputy retains the right to inspect this project and to order such changes as may be required to insure Code compliance. I hereby certify that I have performed the window/door changeout project at the shown address and have complied with the above listed items.

Name: \_\_\_\_\_ Permit #: \_\_\_\_\_

Project Address: \_\_\_\_\_

Contractor: \_\_\_\_\_ License #: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contractor Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Date Returned: \_\_\_\_\_

This Self-Certification Form is valid for 60 days and must be returned to the City within 60 days of the date issued. Please call Mark Harren at 320-309-6455 for inspections. Or contact City of Spicer at 320-796-5562 with questions.