

Notice of Designation or Vacancy of Certified Building Official

To the Commissioner of Labor and Industry:

According to [M.S. §326B.133, Subd. 1](#),

Each municipality shall designate a building official to administer the code. A municipality may designate no more than one building official responsible for code administration defined by *each* form of certification established in [Minnesota Rules, 1301.0200](#)

and further, according to [M.S. §326B.133, Subd. 7](#),

In the event that a designated building official position is vacant within a municipality, that municipality shall designate a certified building official to fill the vacancy *as soon as possible*. The commissioner must be notified of any vacancy or designation in writing within 15 days.

The administrative authority for the municipality of

--

Hereby notifies the Commissioner, pursuant to [M.S. §326B.133](#), that it has made one of the following designations (**A or B selected**):

A. <input type="checkbox"/>	The municipality has designated: <div style="text-align: center; border: 1px solid black; padding: 2px;">NAME (INCLUDE MIDDLE INITIAL)</div>	as a:	<input type="checkbox"/> Certified Building Official Limited <input type="checkbox"/> Certified Building Official
Effective Date:		Certification Number: <small>(Include Letters of Cert. #)</small>	

According to [M.S. §326B.133, Subd. 3a\(c\)](#) the "Certified Building Official Limited" may perform code administration only for one- and two-family dwellings, their accessory structures, and "exempt classes of buildings" as provided in [Minnesota Rules, 1800.5900](#). The municipality shall **also** designate a "Certified Building Official" with **a separate Notice of Designation form**, for the code administration for all other structures when a Certified Building Official Limited is designated as the municipality's building official.

MUNICIPALITY CONTACT INFORMATION

MUNICIPALITY STREET ADDRESS (do not provide a PO Box)		
CITY	STATE	ZIP
PHONE	FAX	E-MAIL

MUNICIPALITY BUILDING OFFICIAL CONTACT INFORMATION

BUILDING OFFICIAL STREET ADDRESS (do not provide a PO Box)		
CITY	STATE	ZIP
WORK PHONE NUMBER	MOBILE PHONE NUMBER	E-MAIL

OR B. <input type="checkbox"/> Municipality has a vacancy in the building official position.	Effective Date:
--	-----------------

The statutory definitions of **Designate** and **Administrative Authority** are established in [M.S. §326B.103, Subd. 6](#). Please have the appointed administrative authority of the municipality sign this form. (Usually known as the Administrator or Manager)

NAME OF ADMINISTRATIVE AUTHORITY (Type or Print)	SIGNATURE OF ADMINISTRATIVE AUTHORITY	
	TITLE	DATE