

City of Farmington
430 Third Street
Farmington, MN 55024
651-280-6830



Residential roofing

- Asphalt shingles

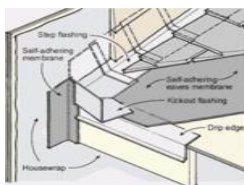
This pamphlet is a compilation of some of the standard requirements based on the State Building Code for projects of this type. This information packet does not contain all of the specific codes and should only be used as a guide. The permittee is responsible to meet all code requirements applicable to each project.

Building Permits are required for roofing in the City of Farmington.

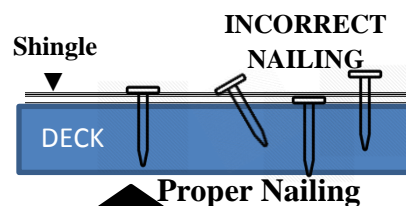
*** Ice and water shield photos are acceptable. Be sure to take pictures of all sides and slopes of roof. Have pictures available at time of final inspection. Must be able to identify building in pictures.**

Building Code Requirements:

- Removal of asphalt shingles is required. New roof coverings shall not be installed without first removing existing roof coverings. Damaged or deteriorated flashings must be replaced. All roof penetrations must be properly sealed.
- Damaged or deteriorated decking shall be replaced.
- Fiberglass or asphalt shingles are not permitted on roofs with a pitch of less than 2:12. These must be designed and roofed as a flat roof.
- Roof slopes from 2:12 up to 4:12 require a double layer of underlayment or continuous ice and water barrier. Double layer underlayment shall be install according to the method prescribed in R905.2.7
- All metal flashing must be of number 26 gauge galvanized sheet steel – corrosion resistant material.
- Where the eave of a sloped roof intersects a vertical side wall a **kick-out flashing** is required when reroofing and residing.



- Open valleys lined with metal, the lining shall be at least 24" wide
- The roof deck must be covered with a 15# roofing felt with 2 inches minimum lap
- An ice barrier that consists of a self-adhering polymer modified bituminous sheet shall extend from the eaves edge to a point at least **24 inches inside the exterior wall line.** (IRC905.2.7.1)
- Roofs must be provided with ventilation per code. Minimum, ventilation requirements are 1 square foot of vent for each 150 square feet of attic.
- Care should be taken to ensure that kitchen and bathroom exhaust fan pipes are connected to the appropriate dampered exhaust roof vent with no openings into the attic that would allow exhaust air back into the attic space. The exhaust vents shall be installed the same as other attic vents and vent pipe flashing.
- When roofing around furnace flues, take care to not dislodge the joints of the flue pipe within the attic or with interior chases this pipe might pass through.
- Fasteners for asphalt shingles shall be galvanized steel, stainless steel, aluminum or copper roofing nails, minimum 12 gauge shank with a minimum 3/8 inch diameter head ASTM F 1667, or a length to penetrate through the roofing materials and a minimum of 3/4 inch into the roof sheathing. Staples are NOT permitted.



When work is ready, an inspection must be requested and made prior to concealing, or pictures must be taken and available at [site](#) for final inspection. Inspection hours are 9:00 AM to 3:15 PM – Weekdays. All inspections require at least 24 hour notice to the Building Department 651-280-6830.

City of Farmington

430 Third St., Farmington, MN 55024
651-280-6830 Fax 651-280-6839



Application For Building Permit

Date _____

Permit No. _____

| | |
|--------------------------|--------------------------------------|
| Site Address | _____ |
| Legal Description | Lot _____ Block _____ Addition _____ |

| | |
|-----------------------|---|
| Property Owner | Name/Company _____ Phone No. _____ |
| | Address _____ |
| | City _____ State _____ Zip _____ |
| | Email address _____ |
| Contractor | Company _____ Phone No. _____ |
| | Contractor License No.: _____ Expiration Date _____ |
| | Address _____ Phone No: _____ |
| | City _____ State _____ Zip _____ |
| | Email address _____ |

Description of Project _____ **Est. Value of Project** _____

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of Farmington to the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Farmington and the State of Minnesota

Applicants Signature _____ **Date** _____

| | | | | |
|--------------------------|--|--|---|-----------------------------------|
| Bldg Permit Type: | <input type="checkbox"/> - SFD | <input type="checkbox"/> - Public | <input type="checkbox"/> - Porch | <input type="checkbox"/> - Other |
| | <input type="checkbox"/> - Duplex | <input type="checkbox"/> - Garage | <input type="checkbox"/> - Demo. Res. | |
| | <input type="checkbox"/> - Res. Multi. | <input type="checkbox"/> - Pool | <input type="checkbox"/> - Demo. Non.Res. | |
| | <input type="checkbox"/> - Commercial | <input type="checkbox"/> - Move | <input type="checkbox"/> - Interior Finish | |
| | <input type="checkbox"/> - Industrial | <input type="checkbox"/> - Other Structure | <input type="checkbox"/> - Roof | |
| | <input type="checkbox"/> - Institutional | <input type="checkbox"/> - Deck | <input type="checkbox"/> - Siding | |
| Work Type: | <input type="checkbox"/> - New | <input type="checkbox"/> - Addition | <input type="checkbox"/> - Interior. Finish | <input type="checkbox"/> - Reside |
| | <input type="checkbox"/> - Remodel/Alt. | <input type="checkbox"/> - Repair/Replace | <input type="checkbox"/> - Masonry Veneer | <input type="checkbox"/> - Reroof |

This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.

OFFICE USE ONLY

| | | | |
|--|--|---|--|
| Office Use Required Inspections | <input type="checkbox"/> - Footing <input type="checkbox"/> - Foundation <input type="checkbox"/> - Framing <input type="checkbox"/> - Insulation | <input type="checkbox"/> - Sheet Rock <input type="checkbox"/> - Final <input type="checkbox"/> - Re-Roof | <input type="checkbox"/> - Other _____ |
| Office Use Census Code: | New <input type="checkbox"/> 101 - 1 Fam. Res. <input type="checkbox"/> 102 - 1 Fam. Attached <input type="checkbox"/> 103 - 2 Fam. (Duplex) <input type="checkbox"/> 104 - 3&4 Family <input type="checkbox"/> 105 - 5 or more Family <input type="checkbox"/> 213 - Hotel/Motel | New <input type="checkbox"/> 214 - Other Shelter <input type="checkbox"/> 318 - Amusement/Rec. <input type="checkbox"/> 319 - Place of Worship <input type="checkbox"/> 320 - Industrial <input type="checkbox"/> 321 - Non Res. Garage <input type="checkbox"/> 322 - Service Station <input type="checkbox"/> 323 - Hosp./Institution | New <input type="checkbox"/> 324 - Office/Bank <input type="checkbox"/> 325 - Utilities <input type="checkbox"/> 326 - Schools/Ed. <input type="checkbox"/> 327 - Retail/Rest. <input type="checkbox"/> 328 - Other Nonres. <input type="checkbox"/> 329 - Nonbldg <input type="checkbox"/> 434 - Alt./Add/ Res. <input type="checkbox"/> 437 - Alt./Add. Nonres. <input type="checkbox"/> 438 - Alt./Add. Res. Gar. <input type="checkbox"/> 645 - Demo 1-Fam. <input type="checkbox"/> 646 - Demo 2-Fam. <input type="checkbox"/> 647 - Demo 3&4 Fam. <input type="checkbox"/> 648 - Demo 5 or more <input type="checkbox"/> 649 - Demo Other |

| Description | Cost per Square Foot | Square Feet | Valuation |
|------------------------------|----------------------|--------------|-----------|
| 1 st Floor | | | |
| 2 nd Floor | | | |
| Basement – Finished | | | |
| Basement - <i>Unfinished</i> | | | |
| Garage | | | |
| Deck | | | |
| Other | | | |
| | | TOTAL | |

Application Approved By:

City Planner/Zoning

Date _____

Permit Approved:

Building Official/Inspector

Date _____

Grading Plan Approved:

Engineering

Date _____

Fire Code Compliance:

Fire Marshal

Date _____