

City of Sauk Centre
320 South Oak Street - Sauk Centre, MN 56378
Ph: (320) 352-2203 ext 5 FAX: (320) 352-0121

Email planning@ci.sauk-centre.mn.us

Residential Remodel, Decks & Mechanical Building Permit Application

For Office Use Only	
Permit No.	_____
PID No. 94.	_____
DATE RCVD.	_____
Permit Fee	_____
Surcharge	_____
Plan Check	_____
TOTAL FEE _____	

Please Type or Print Legibly:

1. Site Address _____

Sauk Centre, MN 56378

2. Owner(s) _____

Contact Phone Number _____

3. Owner's Address (if different from above) _____

4. Legal Description of Site: *(Please Attach Metes & Bounds Description)*

Note If unknown, please refer to property tax statement or ask Zoning Administrator*

Lot _____ Block _____ Addition _____

5. Type of Improvement:

_____ Rcvd. Rqmts? *Note: Section 156.086 prohibits the use of exposed fasteners*

Reshingle _____ (type of material): Asphalt _____ Metal/Steel _____ Other _____

Window Replcement _____ Reside _____ Deck _____ Remodel _____ Mechanical _____ Other _____

6. If remodeling, mechanical or other, describe in detail work to be done _____

7. If residing, describe type of siding _____ *Section 156.086 prohibits the use of exposed fasteners.*

8. Approximate Start Date _____

9. Please provide contractor's name and license number as required by Minnesota Statute

Name _____ License No. _____ **OR**

This work is being done by applicant who is acting as their own general contractor and assumes complete responsibility. I have read and signed the Licensed Contrator Disclaimer. _____ (Initial Here)

10. Estimated Cost of Complete Project: \$ _____

I hereby certify that I have read & examined this application & supporting documents & know the same to be true & correct. I have identified all property boundries, easements, flood zones and/or wetlands existing on the property on my site plan(s) & application. The undersigned further agrees that the City and its' Administrative Staff relied on the accurateness of the application, plans & specificaitons relative to this request and hold the City of Sauk Centre harmless from all liability arising from the granting of a permit. All provisions of Laws & Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel all the provisions of any other state or local law regulating construction.

AUTHORIZED SIGNATURE OF OWNER OR BUILDER

ZONING ADMINISTRATOR

This Permit Expires One Year From: _____

BUILDING INSPECTOR

Licensed Contractor Disclaimer

I understand that the State of Minnesota requires that all residential building contractors, remodelers and roofers obtain a state license unless they qualify for a specific exemption from the licensing requirements. By signing this document, I attest to the fact that I am building or improving this house myself. I hereby claim to be exempt from the state licensing requirements because I am not in the business of building on speculation or for resale and that the house for which I am applying for this permit, located at _____, is the first residential structure I have built or improved in the past 24 months. I also acknowledge that because I do not have a state license, I forfeit any mechanic's lien rights to which I may otherwise have been entitled under Minn. Stat. 514.01.

Furthermore, I acknowledge that I may be hiring independent contractors to perform certain aspects of the construction or improvement of this house and I understand that some of these contractors may be required to be licensed by the State of Minnesota. I understand that unlicensed residential contracting; remodeling, and/or roofing activity is a misdemeanor under Minn. Stat. 326.92, subd. 1, and that I would forfeit my rights to reimbursement from the Contractor's Recovery Fund in the event that any contractors I hire are unlicensed.

I also acknowledge that as the contractor on this project, I am solely and personally responsible for any violations of the state building code and/or city ordinance in connection with the work performed on this property.

Signature of Property Owner

Date _____

To determine whether a particular contractor is required to be licensed, or to check on the licensing status of individual contractors, please call the Minnesota Department of Commerce, Enforcement Division, at 1-800-657-3602.

Re-Roofing Requirements

1. The State of Minnesota Department of Commerce requires that all contractors doing residential roofing must have a State license number as a contractor or roofer. The City of Sauk Centre requires that this number be listed on the required building permit.
2. Building permits are required for re-roofing. Contact Sauk Centre Planning/Zoning Office when starting a project.
3. Please follow the manufacturer installation instructions, which are printed on each bundle of shingles. These may include helpful diagrams. This shingle manufacturer will not warrant the shingles if their installation instructions are not followed.
4. Roof sheathing shall be checked by the installer/contractor prior to re-roofing and repair or replaced if rotted or unsound.
5. No more than one (1) overlay of asphalt/fiberglass shingles shall be applied over an existing asphalt shingle roof.
6. Asphalt/fiberglass shingles shall in no case be used on roofs with less than 2-12 pitch, and required special application on pitches less than 4-12.
7. Asphalt/fiberglass shingles shall weigh not less than 200 lbs. per square and be fastened with no less than four nails or approved staples per strip. Galvanized nails shall be not less than 12 Ga. With 3/8" minimum diameter head. Galvanized staples shall be not less than 16 Ga. With 15/16" minimum crown width. Nails or staples shall be of sufficient length to penetrate through roofing material and at least 3/4" into roof sheathing. Staple crown shall be driven so that it tightly bears against shingle but does not cut shingle surface. Crown shall be parallel to long dimension of shingle. Do not drive fastener into or above factory applied adhesive.
8. Starter strip and shingles shall overhang the eaves so that at least a 3/4" drip edge is provided. Valley flashing shall consist of not less than 28 Ga. Galvanized sheet corrosion resistant metal. The metal shall extend at least 8" from the centerline each way. Sections of flashing shall lap at least 4".
9. All existing flashing and roof vents shall be checked and if rusted or in damaged condition shall be replaced.
10. Additional roof and soffit vents shall be installed so that for every 150 square feet of roof area there is at least one 60 square inch roof vent and 60 square inches of soffit venting.

Please note exposed fasteners on metal roofs are not allowed per:

§ 156.086 CONSTRUCTION MATERIALS.

(A) Single-family dwelling roofs shall be shingled with asphalt, wood, tiles, metal (with concealed fasteners) or other comparable materials that comply with the applicable provisions of the Building Code.

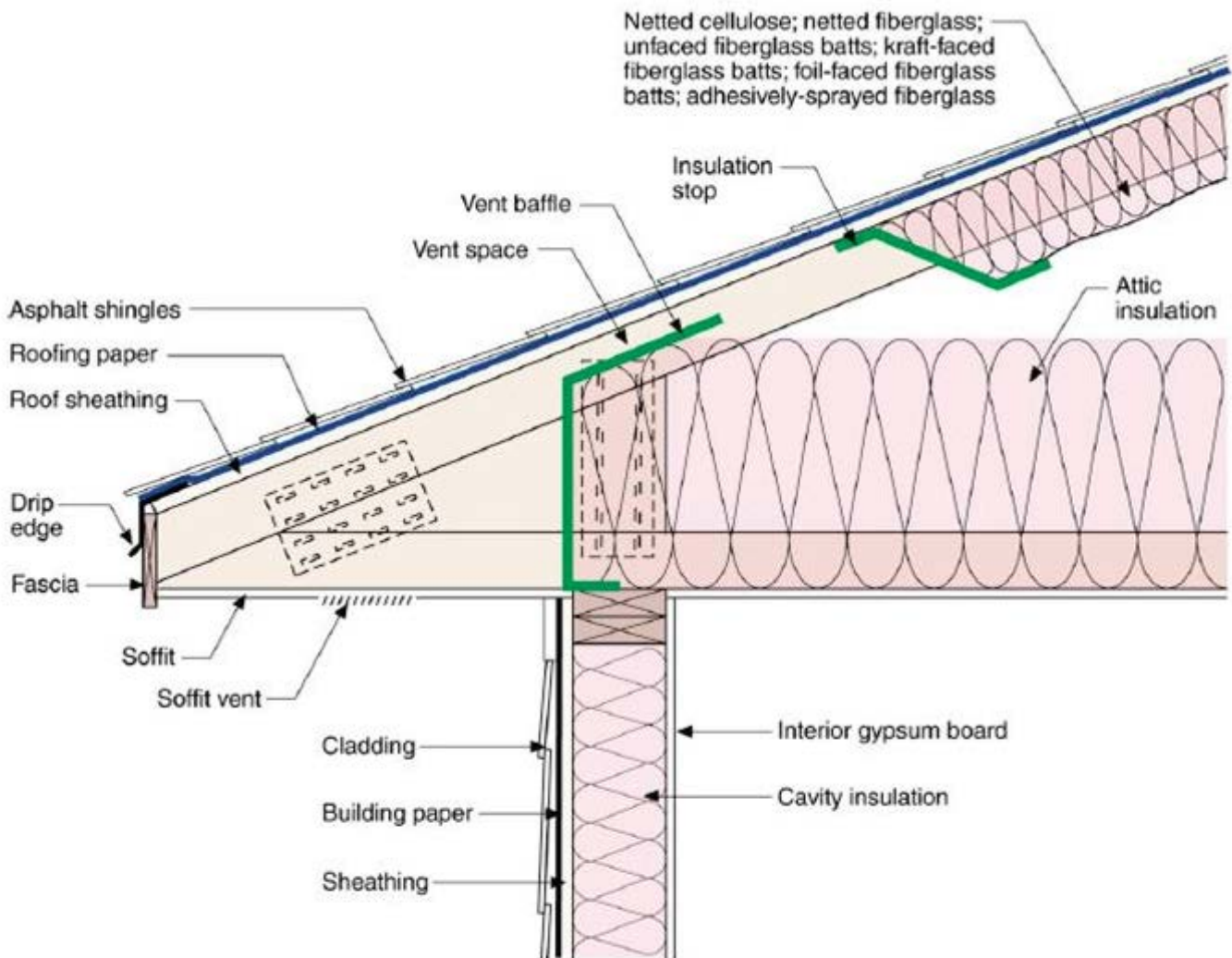
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The City of Sauk Centre enforces the Uniform Building Code Section 1507 relating to Ice Dam Build-up at eaves which calls for two layers of Type 15 felt applied shingle fashion (minimum 4" overlap) and solid mopped together with approved cementing material between the plies extending from the eave up the roof to a point 24" (36" for wood shakes or shingle) inside the exterior wall line of the building.

ALTERNATIVE MATERIAL:

An acceptable alternative would be approved ice shield materials provided by roofing manufacturers such as Winter Guard, Deck Dry, Ice Shield or an equal product.

Remainder of roof to be covered with 15# felt unless otherwise specified by code, or by the manufacturer.



Venting Details for Modified Conventional Vented Attic

Air Chutes

50# felt and 90# felt roofing **will not** be acceptable as an ice shield layer.