



## **"RE-ROOFING" PERMIT REQUIREMENTS**

The following information must be submitted to the Building Official before a roofing permit can be processed and approved.  
More detailed information is listed below.

After a preliminary review, additional information may be required.

**Permit Application Form:** Complete and sign a permit application. Application forms are available at City Hall.

### **General Information**

**When is a Roofing Permit Required?** A roofing permit is required for all dwellings, garages and commercial/business use structures.

For re-roofing of a commercial, industrial or business type structures contact the building official for specific requirements.

**Required Inspection:** A roofing inspection is required when the roofing is complete. A ladder ***must*** be provided on site. For all inspections call **218-940-1682 48 hours in advance**.

### **ASPHALT SHINGLES**

**Manufacturer's Installation Instruction:** Always refer to the manufacturer's installation requirements for specific installation requirements.

**Ice Protection:** An ice barrier that consists of at least 2 layers of underlayment cemented together or a self-adhering polymer modified bitumen sheet, shall be used in lieu of underlayment and extend from the eaves edge to a point 24" inside the exterior wall line of the building. (IRC R905.2.7.1)



8319 County Road 11  
Breezy Point, MN 56472  
Phone: (218) 562-4441  
[www.cityofbreezypointmn.us](http://www.cityofbreezypointmn.us)

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

Issued On: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Receipt #: \_\_\_\_\_

## Re-Roofing Permit Application

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Project Address: \_\_\_\_\_ PID #: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Roofing Contractor: \_\_\_\_\_ License # : \_\_\_\_\_ Phone: \_\_\_\_\_

A license number is not required if an owner is re-roofing their own home. Check here \_\_\_\_\_ if you are doing the work yourself.

Type of building being re-roofed: House \_\_\_\_\_ Garage \_\_\_\_\_ Other \_\_\_\_\_

Is the existing roof covering being taken off? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, how many layers are there now? \_\_\_\_\_

What type of roof covering is being installed? \_\_\_\_\_

Are you replacing roof sheathing, rafters, roof vents, etc.? Describe all work being done: \_\_\_\_\_

I hereby certify with my signature that all data on this application is true and correct to the best of my knowledge.

Signature of Applicant / Owner Agent: \_\_\_\_\_

Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### CITY USE ONLY

**BUILDING OFFICIAL:** Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Subject to the following conditions: Call for inspection 48 hours in advance of when the roofing is complete. To schedule an inspection call 218-940-1682. Provide a ladder onsite for roof access, see attached handout.

**PUBLIC WORKS:** Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Subject to the following conditions: \_\_\_\_\_

### FEES

Building Permit: \_\_\_\_\_ Plan Review: \_\_\_\_\_ State Surcharge: \_\_\_\_\_

**TOTAL DUE:** \_\_\_\_\_