

City of Inver Grove Heights  
8150 Barbara Avenue  
Inver Grove Heights MN 55077  
Inspections Department  
Phone: 651-450-2550  
Fax: 651-450-2502  
[www.invergroveheights.org](http://www.invergroveheights.org)

# SIDING

A Building Permit is required for residing of all buildings in Inver Grove Heights.

## REQUIREMENTS

Kickout flashing is required where the lower portion of a sloped roof stops within the plane of an intersecting wall.

Exterior walls shall have a weather resistive material applied over the sheathing under wood, vinyl, metal, or other manufactured siding. Acceptable material shall be at least one layer of #15 asphalt felt complying with ASTM D 226 for type 1 felt or other approved material. The material shall be applied to all walls (Including gable walls of attics and other unheated spaces). The material shall extend up to the bottom of the rafter or truss top chord, unless the soffit is not removed nor exposed, then the underlayment may terminate at the bottom of the soffit. Any vertical joints shall be lapped by at least 6" and horizontal joints lapped at least 2".

## EXCEPTIONS

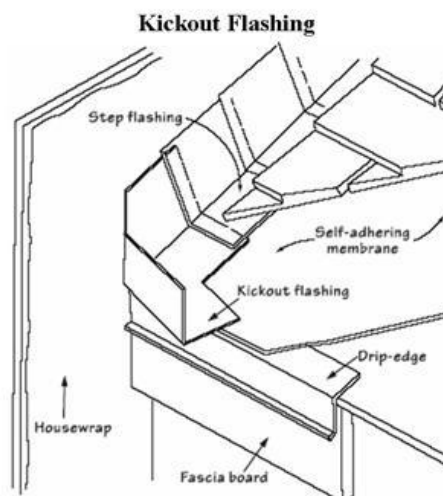
- Not required for detached accessory buildings.
- Not required where specifically prohibited by a sheathing or siding manufacturer.

Note: Because of lengthy and somewhat complicated requirements, the Building Code should be consulted prior to the application of stucco or masonry siding.

## FLASHINGS

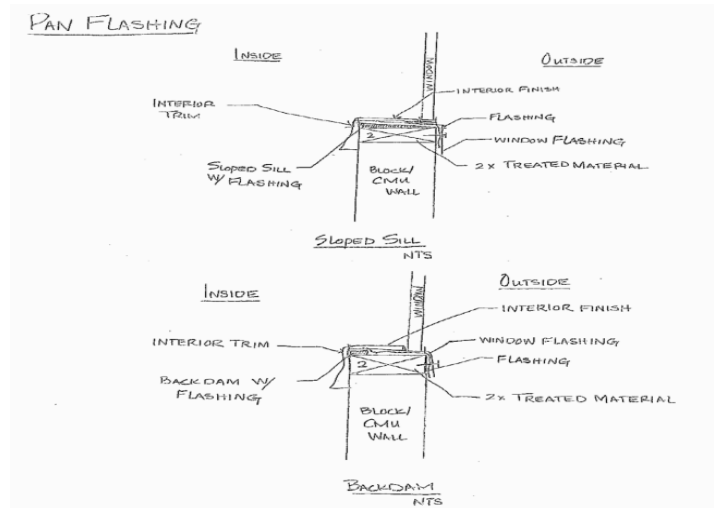
Approved corrosion resistant flashing shall be applied shingle fashion in a manner as to prevent entry of water into the wall cavity or penetration of water to the building structural framing components. The flashing shall extend to the surface of the exterior wall finish. Approved corrosion resistant flashing shall be installed at all of the following locations:

- Exterior window and door openings. Flashing at the exterior window and door openings shall extend to the surface of the exterior wall finish or to the water resistive barrier for subsequent drainage.
- Under and at the ends of masonry, wood, or metal openings and sills.
- Continuously above all projecting wood trim.



## PAN FLASHING OF WINDOWS AND DOORS

(for new construction and additions)



A pan flashing shall be provided under all exterior windows and doors. Pan flashing shall be: a) sloped to drain water to the exterior surface of a weather resistant barrier or flat with sealed back dam and side dams to prevent re-entry of water into the wall cavity or onto interior finishes; and b) maintain the thermal envelope of the building. Pan flashing made from metal must be thermally isolated from interior surfaces.

Exceptions:

1. Windows or doors installed in accordance with the manufacturer's installation instructions which include an alternate flashing method.
2. Windows or doors in detached accessory structures.
3. Skylights, bow or bay windows.
4. Doors required to meet accessibility requirements that would prevent the installation of pan flashing.
5. Repairs or replacement of existing windows and doors,
6. When a method is provided by a registered design professional.

## INSPECTIONS

Inspections will be done to insure code compliance and to verify that the materials used are installed properly. Please contact the Inspections Department 24 hours in advance to schedule an inspection.

1. When at least 2 walls can be visually inspected for the underlayment and at least 1 opening with approved flashing is installed typical of all openings.
2. Final inspection when all work is completed (siding, soffit, fascia, caulking, house numbers).

This information is intended to be used as a guide only. Refer to the siding manufacturer's installation instructions for a complete set of requirements.

## PERMIT FEES

Single family: \$105 + \$1 surcharge

Multi-family and commercial: based on job valuation

Payment can be made by cash, check, or major credit card.

## QUESTIONS:

For additional information or to schedule an inspection, contact the Inspections Department at 651-450-2550.

# CITY OF INVER GROVE HEIGHTS BUILDING PERMIT APPLICATION

PERMIT #

1. BUILDING SITE ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_

2. OWNER NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

3. CONTRACTOR \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ (FAX) \_\_\_\_\_

4. ARCHITECT/ENGINEER \_\_\_\_\_ ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ (FAX) \_\_\_\_\_

5. EMAIL \_\_\_\_\_

6. CLASS OF WORK: NEW  ADDITION  REMODEL/ALTERATION  OTHER

7. DESCRIBE WORK \_\_\_\_\_

8. USE OF BUILDING \_\_\_\_\_

9. CONSTRUCTION DATA:

Setbacks: Front \_\_\_\_\_ Square Feet: Basement \_\_\_\_\_ Garage \_\_\_\_\_

Right Side \_\_\_\_\_ 1st Floor \_\_\_\_\_ Porch \_\_\_\_\_

Left Side \_\_\_\_\_ 2nd Floor \_\_\_\_\_ Deck \_\_\_\_\_

Rear Side \_\_\_\_\_ 3rd Floor \_\_\_\_\_ Other \_\_\_\_\_

Structure Height: \_\_\_\_\_ VALUATION (Incl. Labor): \_\_\_\_\_

10. The undersigned acknowledges that he/she has read this application and that the above is correct and agrees to comply with all the ordinances and laws of the City of Inver Grove Heights regulating building construction.

\_\_\_\_\_  
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT      DATE

NOTICE: This is an application only. Permit will be issued after city approval and payment of fees.

OFFICE USE ONLY

	FEE TYPE	AMOUNT	RECEIPT CODE
Zoning _____	Contractors License _____	_____	AK
Occupancy _____	Building Permit _____	_____	AL
Type of Constr. _____	Plan Review _____	_____	AM
# of Stories _____	Surcharge _____	_____	BR
Bdrm/Dwelling Units _____	Sprinkler/Alarm Permit _____	_____	AO
Max. Occup. Load _____	Misc. Permits (Sign, Fence) _____	_____	AR
Sprinklered _____	MCWS Sac Charge _____	_____	BP
	Sewer Connection Fee _____	_____	BD
	Water Connection Fee _____	_____	BC
Application Accepted By _____	Water Treatment Fee _____	_____	CD
License No. _____	Meter Sale _____	_____	WD
Building Insp. Approval _____	Tax on Meter _____	_____	BQ
Planning Approval _____	B-Line Sewer Connection _____	_____	BE
Engineering Approval _____	Park Dedication Fees _____	_____	BO
Fire Marshal Approval _____	Eagan Utility Connections _____	_____	CA
Approved to Issue By _____	Other Forms & Fees _____	_____	AS
Date Approved _____	<b>TOTAL FEE</b> _____	_____	
	Receipt # _____	Date Issued _____	

SPECIAL CONDITIONS \_\_\_\_\_

★ APPLICANT NOT TO SEPARATE SHEETS ★

NOTICE: Inspections made by the City are a public service and do not constitute any representation, guarantee or warranty, either implied or expressed, to any person as to the condition of the building inspected.