



Department of Building Safety

101 4th St E, Hastings, MN 55033

Phone: 651-480-2342

Email: Building@Hastingsmn.gov

www.hastingsmn.gov

Roof-Flat Commercial

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

Note: If the property is a Heritage Preservation Site prior approval from City Planner and/or HPC is required before issuance of permit.

Submittals:

- ☐ Building Permit Application
- ☐ Plan view
 - Dimensions
 - Drainage plan
 - Insulation
 - Roof top structures
 - Perimeter and corner dimensions for enhanced fastening requirements
- ☐ Insulation/coverboard attachment requirements
- ☐ Manufacturer specifications of product being installed plus installation instructions
- ☐ Indicate new or reused metal components
- ☐ Fire Classification of roof
- ☐ Engineering Report (if roof load is increased)

Typical Inspections:

Contractor must be onsite to provide access for inspections

- ☐ Insulation with Fastener Pattern
- ☐ Final

Typical Requirements for Commercial Flat Roofs:

- Roof decks and roof coverings shall be designed for wind loads in accordance with MN 1303.2200
- Flashing shall be installed in such a manner as to prevent moisture from entering the wall and roof through the joints in the copings, through moisture-permeable materials and at intersections with parapet walls and other penetrations through the roof plane. MN 1503.2
- Insulation requirements for roof replacement must meet 2024 MN Commercial Energy Code*. See Table 5.5-6.

Table 5.5-6 Building Envelope Requirements for Climate Zone 6

Opaque Elements	Non-Residential		Residential	
	Assembly Maximum	Insulation Min. R-Value	Assembly Maximum	Insulation Min. R-Value
Insulation entirely above deck	U-0.032	R-30 c.i.	U-0.032	R-30 c.i.

*Exception: Where insulation is provided above the roof deck, and the required R-value cannot be provided because of thickness limitations, the maximum insulation compatible with the available space shall be installed as approved by the building official.

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Application**

SITE ADDRESS: _____

PID#: _____

Owner Name: _____

Contact Name: _____

Street Address: _____

Phone: _____

City: _____ State: _____ Zip: _____

Email: _____

Occupant Name: _____

Contact Name: _____

Street Address: _____

Phone: _____

City: _____ State: _____ Zip: _____

Email: _____

Description of Project: _____ **Valuation:** \$ _____

Note: If building is a Heritage Preservation Site prior approval from city planner and/or HPC is required before issuance of permit for any work involving the exterior of the structure.

Building Contractor	Company: _____ Phone: _____
<input type="checkbox"/> Owner Performed	Contact Name: _____
(Owner Waiver Required)	License # _____ Exp Date: _____
	Street Address: _____
	City: _____ State: _____ Zip: _____
	Email: _____

The undersigned acknowledges that he/she has read this application, and the above information is correct and accurate. Applicant also understands by signing this application that he/she could be held responsible as representative of this project for any violation of compliance with all applicable laws and ordinances of the City of Hastings.

Signature of Applicant or Authorized Agent_____
Date

NOTICE: This is an **application only**. Permit will be issued after City approval and payment of fees. Permit shall be null and void if authorized work is not started within 180 days or work is suspended for 180 days or more.

OFFICE USE ONLY

Bld Type	<input type="checkbox"/> SFD <input type="checkbox"/> DUPLEX	<input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> CONDO	<input type="checkbox"/> COMMERCIAL	
Work Type	<input type="checkbox"/> Retaining Wall <input type="checkbox"/> Foundation	<input type="checkbox"/> Garage/Acc. <input type="checkbox"/> Sump Pump	<input type="checkbox"/> Remodel	<input type="checkbox"/> Other
Required Inspections	<input type="checkbox"/> Footings <input type="checkbox"/> Drain tile <input type="checkbox"/> Sewer/Water	<input type="checkbox"/> Framing <input type="checkbox"/> Sheathing <input type="checkbox"/> Ice/water <input type="checkbox"/> WRB	<input type="checkbox"/> Mech RI <input type="checkbox"/> Plumb RI <input type="checkbox"/> Plumb Final <input type="checkbox"/> Mech Final	<input type="checkbox"/> Life Safety <input type="checkbox"/> Final
Fee Notes	<input type="checkbox"/> Plan Review _____ _____ _____	<input type="checkbox"/> Other _____ _____ _____	<input type="checkbox"/> SAC/WAC	

Residential Valuation

Basement	Sq Ft	\$/Sq Ft	Subtotal
Crawl Space		\$15.00	
Unfinished		\$30.00	
Mechanical Room		\$30.00	
Finish (New)		\$50.00	
Finish (Existing)		\$30.00	
Finish (Existing Conversion- No Plumb)		\$25.00	
Single/Multi Family	Sq Ft	\$/Sq Ft	Subtotal
Main Floor		\$100.00	
Second Floor		\$100.00	
Unfinished Floors Above Grade		\$75.00	
Garage	Sq Ft	\$/Sq Ft	Subtotal
Wood Framed		\$50.00	
Carport		\$30.00	
Decks/Porches	Sq Ft	\$/Sq Ft	Subtotal
Covered Entry		\$50.00	
Screen Porch		\$75.00	
3 Season Porch		\$85.00	
4 Season Porch		\$95.00	
Deck		\$25.00	
TOTAL			

Building Approval: _____ Date: _____

Planning Approval: _____ Date: _____

Engineering Approval: _____ Date: _____

Fire Marshal Approval: _____ Date: _____