

## ROOFING PERMIT (EXISTING BUILDING)

ADDRESS OF PROJECT: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

APPLICANT COMPANY (if any): \_\_\_\_\_

APPLICANT EMAIL: \_\_\_\_\_

PROPERTY OWNER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY OWNER EMAIL: \_\_\_\_\_

BRIEF DESCRIPTION OF WORK / APPROVAL REQUEST: \_\_\_\_\_

**CIRCLE ALL THAT APPLY:** 1-, 2- OR 3-FAMILY DWELLING | OVER 3-FAMILY DWELLING | COMMERCIAL  
ACCESSORY BUILDING | OTHER: \_\_\_\_\_

**PROVIDE THE FOLLOWING INFORMATION APPLICABLE TO THIS PROJECT:**

<b>ESTIMATED VALUE OF THIS CONSTRUCTION:</b>	\$
<b>WILL THIS BE A COMPLETE TEAR OFF AND REPLACEMENT?</b> <small>NOTE: NO MORE THAN TWO LAYERS ARE PERMITTED FOR ANY ROOF.</small>	YES    NO
<b>ROOF PITCH:</b>	
<b>TYPE OF VENTILATION TO BE PROVIDED (MIN. 1/150SF OF ATTIC SPACE REQUIRED):</b>	
<b>TYPE OF ROOF COVERING MATERIALS TO BE USED:</b>	
<b>IF ANY MATERIALS ARE NOT CLASS A, INDICATE WHAT "CLASS A" THEY WILL BE :</b>	
<b>WILL ANY HVAC, GAS, PLUMBING OR ELECTRIC ITEMS BE MOVED, ALTERED, REMOVED, RELOCATED OR REPLACED AS A RESULT OF THIS PROJECT?</b>	YES    NO

**NOTICE: ALL ROOFING PERMITS REQUIRE INSPECTION APPROVAL! INSPECTION IS REQUIRED TO VERIFY THE ICE GUARD AND UNDERLAYMENT INSTALLATION AS WELL AS THE ROOF COMPLETION. FAILURE TO OBTAIN THE REQUIRED INSPECTION APPROVAL WILL REQUIRE IN REMOVAL OF MATERIALS. IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE THAT ALL REQUIRED ROOF INSPECTIONS HAVE BEEN SCHEDULED WITH THE BUILDING DEPARTMENT.**

APPLICANT CERTIFIES THAT ALL ABOVE INFORMATION IS CORRECT AND THAT ALL APPLICABLE LAWS AND ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THE PERMIT IS ISSUED AND THAT THEY ARE AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION.

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

FOR BUILDING DEPARTMENT PERSONNEL USE ONLY:		
APPLICATION #:	TOTAL AMOUNT DUE FOR PERMIT ISSUANCE:	\$