

2024 ROOFING PERMIT APPLICATION

Building Classification: Residentia	al Commercia	al FEE Value formula plus \$50.00
Property Address:		
Owner:		
Owner's Address:		
Email:	Phone:	
Contractor:	License #:	
Contractor's Company Name:		
Contractor's Address:		
Email:	Phone:	
application prior to review of the . Pitch of roof Type of roof Manufacturer:* Please submit manufacturer's in for any materials other that aspha. Are there previous layers of roofing to the submit manufacturer's in for any materials other than a sphane.	roofing permit application Total Conformation on minimumaltic shingles (web link	ost \$
*If more than 2 layers of any type required to ensure structural stab	pility and soundness ur	
If so, how many?	What type?_	
This application and the resulting permit a modifications, interior roof drains, or med		
Contractor/Agent Signature	Print	/
Approved: Chief Building official		/