Small, Serene, Simply Garnett.

APPLICATION FOR ROOFING PERMIT

APPLICATION NO._____ APPROVED BY:_____ APPROVED DATE:_____

TO BE FILLED OUT BY APPLICANT:

Applicant/Contractor:_____ Applicant Phone: _____

Address: _____ ZIP:_____

Contractor Kansas State Registration Certificate No.:_____

ALL ROOFING SHALL COMPLY WITH APPLICABLE PROVISIONS OF THE ICC CODES

☐ Remove/Replace ☐ Repair Only Structure Type (SELECT ONE: HOME GARAGE OUTBLDG COMM)

Fee: ☐ Remove/Replace: $35.00 ☐ Repair Only: $25.00

Property Owner Name: _____ Jobsite Address:_____

Estimated Start Date:_____ Estimated Completion Date:_____

Except in case of emergency, permit applications must be submitted not less than three (3) business days in advance for review and processing. The Zoning Administrator reserves the right to issue or deny any permit within 30 days of application, in accordance with City Zoning Regulations. No work shall commence until a signed permit has been received by the applicant. Permit must be present at the jobsite and available for viewing by City staff.

A City official shall make all inspections unless other provisions for inspection are made, in advance, and approved by the Zoning Administrator.

IT IS THE RESPONSIBILITY OF THE PERMIT HOLDER to contact the office of the Zoning Administrator at least two (2) hours in advance for all required inspections. Permit holder or representative must be on-site for all required inspections. Except in case of emergency, inspections must be conducted during normal business hours.

SIGNATURE OF APPLICANT:_____ DATE:_____

CITY USE ONLY

INSPECTED AND APPROVED:_____

BUILDING OFFICIAL/ZONING ADMINISTRATOR DATE