

Town of Calumet, OK

ROOFING PERMIT

OWNERS NAME: _____ PHONE #: _____

OWNERS MAILING ADDRESS: _____

CONTRACTORS COMPANY NAME: _____

CONTRACTORS REPRESENTATIVE NAME: _____

CONTRACTORS MAILING ADDRESS: _____

BUSINESS PHONE # _____ CONTRACTORS E-MAIL _____

NEW CONSTRUCTION

EXISTING STRUCTURE

STRUCTURE OF ROOF:

KNOWN DEFECTS (IF ANY)

ROOF COVERING:

1. WHAT TYPE OF COVERING IS CURRENTLY ON THE ROOF? _____
2. WHEN JOB IS COMPLETE, HOW MANY LAYERS WILL THERE BE? _____
3. WHAT TYPE OF ROOF COVERING WILL BE USED FOR THIS JOB? _____

TYPE OF STRUCTURE:

HOUSE

GARAGE

OTHER _____

WHAT IS THE VALUE OR COST OF IMPROVEMENT MADE TO THIS PROPERTY? _____

COMPLETE TEAR-OFF & RE-ROOF OF STRUCTURE

(TEAR-OFF IS REQUIRED IF THERE WOULD BE MORE THAN TWO LAYERS AFTER JOB IS COMPLETE)

REPAIR ROOF STRUCTURE

OTHER INFORMATION:

RECEIVED BY: _____

DATE: _____

\$20.00 FEE PAID BY: CHECK CASH MONEY ORDER CREDIT CARD

BUILDING PERMIT# _____

JOB PERMIT# _____