



The following information shall be provided for City review and approval prior to issuing a building permit for reroofing.

1. Site Address: _____
2. Occupancy Type(RESIDENTIAL/COMMERCIAL): _____
3. Owner's Name: _____ Phone: _____
4. Owner's Address: _____
5. Construction Valuation(Labor & material costs) _____
6. Roof Covering Applied To?: Entire Roof: _____ Partial Roof _____ (for partial provide layout)
7. Roof Slope: _____ inches in 12 inches. New Roof Weight per Square _____
8. Roof Type and # of Squares: _____
9. Roof Trade Name/Manufacturer: _____
10. ICC, UL, or other approved testing agency listing #: _____
11. Cool Roof Product I.D #: _____
12. Description of New Roof Application: _____

13. Type of Existing Roof: _____ Is There More Than One Existing Roof? ____ Yes ____ No
14. Existing Roof To Be Removed?: ____ Yes ____ No Re-sheathing?: ____ Yes ____ No
15. Is The Existing Structural Design Sufficient To Sustain the Weight Of The Proposed New Roof? _____ Yes
_____ No

Reroofing requires a pre-roofing inspection prior to the application of any new materials CBC 1510 & CRC 907. The pre-roofing inspection may be accomplished by a special inspector in lieu of the City Inspector. The Building Official has determined that a State licensed general contractor or roofing contractor is qualified to act as the special inspector.

- ☐ I certify that all information on this form is true and correct.
- ☐ I agree to perform all work in accordance with City Building requirements.
- ☐ I am a licensed general or roofing contractor and will act as the pre-roofing special inspector. I will certify in writing prior to City approval that the pre-roofing inspection was made and that the substrate and/or existing roof complied with CBC 1510 & CRC 907 prior to application of the new roof.

Home Owner Signature: _____ Date: _____

Contractor's Firm Name: _____ State License #: _____

Contractor's Signature: _____ Date: _____