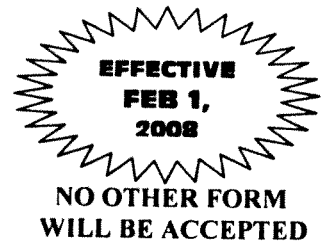


# Roof Application

CITY OF INDIAN ROCKS BEACH



\*\*\* Application will not be accepted without parcel ID #. \*\*\*  
(ACQUIRE FROM PROPERTY APPRAISER 464-3207)

PLEASE PRINT

Job Address \_\_\_\_\_ Permit # \_\_\_\_\_  
Parcel ID (required) \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ Codes in Effect: **FBC 04**

Company Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Company Address \_\_\_\_\_ Cell # \_\_\_\_\_  
city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ street \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

## ROOF CATEGORY

<input type="checkbox"/> Asphalt/Fiberglass Shingles	<input type="checkbox"/> New Roof	_____ Flat Roof Area (ft2)
<input type="checkbox"/> Low Slope Application	<input type="checkbox"/> Re-roofing	_____ Sloped Roof Area (ft2)
<input type="checkbox"/> Nail-On Tile	<input type="checkbox"/> Recovering	_____ Total (ft2)
<input type="checkbox"/> Mortar-Set Tile	<input type="checkbox"/> Repair	_____ Pitch of Roof
<input type="checkbox"/> Metal Roofs/Wood Shingles/Shakes		

Florida Product Approval #'s \_\_\_\_\_  
Roof Covering Manufacturer \_\_\_\_\_

Description of Work \_\_\_\_\_  
Job Cost \$ \_\_\_\_\_ (to include material & labor - attach signed/accepted contract)

*	SHINGLE ↓	TILE ↓	METAL ↓	FLAT ↓
Base Ply/Underlayment				
Base Ply				
Adhesive				
Fasteners				

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit may be required for: ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AND AIR CONDITIONING WORK WHETHER INCLUDED IN THIS PERMIT OR NOT. \*\*\* WARNING TO OWNER: YOU'RE FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. **AFFIDAVIT:** I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Signature \_\_\_\_\_ Print Name - License holder or Agent (circle one) \_\_\_\_\_ Date \_\_\_\_\_

Code Compliance Review By: \_\_\_\_\_ Date \_\_\_\_\_  Approved  Denied  
Comments: \_\_\_\_\_

NOC Y No n/a Cont'r Reg? Y N Add \_\_\_ Roof \_\_\_ Add Insp's \_\_\_ Review \_\_\_ Bus. Reg. \_\_\_ Issue \_\_\_  
**TOTAL COST \$** \_\_\_\_\_