



ROOF / RE-ROOF PERMIT APPLICATION

100 NW 1st Avenue Delray Beach FL 33444
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Website: mydelraybeach.com

PROPERTY CONTROL #: _____

PLEASE PRINT

JOB SITE ADDRESS _____
PROPERTY OWNER NAME _____
HOME PHONE (_____) _____ CELL _____
PROPERTY OWNER ADDRESS _____
ROOF CONT'R (COMPANY) NAME _____
ROOF CONT'R ADDRESS _____
CITY _____ ST _____ ZIP _____
BUS. PHONE (_____) _____ CELL _____
FAX _____ E-MAIL _____

FOR OFFICE USE ONLY:

BLDG PERMIT #:	_____
ROOF PERMIT #:	_____
PERMIT FEE:	_____
PLAN CHECK FEE:	_____
MCR #:	_____

APPROVALS:	
PLAN:	_____ DATE: _____
P & Z:	_____ DATE: _____

NOTE: PERMIT EXPIRES IF WORK IS NOT STARTED WITHIN 180-DAYS OR IF ACTIVITY LAPSES FOR 180 DAYS. PLANS MUST BE ON THE JOB SITE FOR ALL INSPECTIONS. FINAL INSPECTION IS REQUIRED ON ALL PERMITS.

PROJECT COST (Labor and Material) \$ _____

Check one: NEW CONSTRUCTION RECOVER OVER EXISTING (Engineer's Letter Required) REMOVE EXISTING & REPLACE R/R A/C UNITS (Mech. Permit Required)

Check one: SINGLE-FAMILY* MULTI-FAMILY COMMERCIAL

***MITIGATION REQUIREMENTS IF SINGLE FAMILY:**

- YEAR BUILT (check one):** BEFORE MARCH 2002 (Go To #2) AFTER MARCH 2002
- HOUSE VALUE:** \$ _____ **MUST PROVIDE:** HOME INSURANCE SUMMARY SHEET **OR** COPY OF MOST RECENT TAX BILL **OR** PROPERTY APPRAISER OFFICE WEBPAGE (IF \$300,000, OR MORE, NOT INCLUDING LAND VALUE, GO TO #3)
- SUBMIT RE-ROOFING MITIGATION DOCUMENT PACKAGE and BUILDING APPLICATION**

TYPE/COLOR OF ROOF MATERIAL REMOVED _____ TYPE/COLOR OF ROOF MATERIAL INSTALLED _____

NOTE: FOLLOW MANUFACTURER'S GUIDELINES AND NOTICE OF ACCEPTANCE FOR SHINGLE INSTALLATION.

ROOF TYPE (CIRCLE): _____ MANUFACTURER: _____ PRODUCT APPROVAL NUMBER: _____
FLAT _____
SLOPED : 12 _____

SIGNATURE OF QUALIFIER **CONTR. REGISTRATION #** **WORKERS COMP#** **OR** **EXEMPTS (FID /FEIN) #**

STATE OF _____ Personally Known _____
COUNTY OF _____ OR
Produced Identification _____
Type of Identification Produced _____

The foregoing instrument was acknowledged before me this _____ day
of _____, 20____ by _____.

(SEAL)

Signature of Notary Public