



# VILLAGE OF EVENDALE

Department of Building Commissioner

## ROOF APPLICATION

APPLICATION NUMBER

PROJECT LOCATION: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_

OWNER ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_

CONTRACTOR ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

RESIDENTIAL: \_\_\_\_\_

COMMERCIAL: \_\_\_\_\_

ROOF TYPE: \_\_\_\_\_ TEAR DOWN: Yes \_\_\_\_\_ No \_\_\_\_\_

MATERIAL LIST: \_\_\_\_\_

SQUARE FOOTAGE: \_\_\_\_\_

ESTIMATED COST: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

DATE PERMIT WAS ISSUED: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

PERMIT FEE: \$ \_\_\_\_\_