

**LOWER FREDERICK TOWNSHIP
APPLICATION FOR RE-ROOF PERMIT**

Office Use Only: Permit #: _____ Fee Submitted: \$ _____
Check #: _____ Cash: _____

Owner: _____ Phone Number: _____

Address: _____

Contractor: _____ Phone Number: _____

Township General Contractor #: _____

Address: _____

Signature of Applicant _____, Date _____

Location of Building:

Address: _____ Zoning Dist.: _____

Block _____, Unit _____

Existing Use of Building:

Residential: Single Family Two or More Family Other (specify)

Non-Residential: List existing use(s) of building:

Other Information:

1. Is the existing roof ventilation adequate? Yes ____ No ____
If the existing roof ventilation is inadequate, how will the ventilation be improved?

 2. Is the roof sheeting being replaced? Yes ____ No ____
If yes, explain: Type of material: _____ Thickness _____
Square foot of sheeting replaced _____

 3. Felt: _____ lb.

 4. Shingles: _____ year _____ class

 5. Pitch of roof: _____

 6. Is the existing roof covering being removed? Yes ____ No ____
If no, how many layers of covering are existing? _____
If yes, how will the old roof covering be disposed? _____
- Note: Proof of disposal may be required.**
7. How many square of roof covering? _____

NOTE: It is the applicant's responsibility to call the Code Office for the required inspections.
Pre-Close - prior to application of roof covering.
Final - when work is complete. Be prepared to supply dump tickets.

This permit is approved/denied on the express condition that the roof covering shall, in all respects, conform to the adopted IBC 2006.

This permit is not valid if construction work is not started within six months from date permit is issued.

Re-Roofing of existing commercial structures will require the submission of the technical data provided by the manufacturer of the roof covering supplier.

Permit is approved _____ denied _____

Code Enforcement Office Official
Lower Frederick Township

Date