

**Application for Roofing Permit
Highlands County, Florida**

Owner _____

Roofing Contractor _____

Address _____

Address _____

City _____

City _____

Phone _____

Phone _____

Legal Description Of Property:

Strap: C- _____ - _____ - _____ - _____ - _____ Map Number _____ Subdivision _____ Lot _____ Block _____

Address: _____ Legal Description _____ Unit/Sec _____

I. New Construction _____ Repairs: _____ Roof Over (Mobile Home only): _____ Remove Roofing & Replace: _____

Value of Work [Contract Price] \$ _____

Permit Fee	\$ _____
Certificate of Completion	\$ _____
State Surcharge	\$ _____
Total:	\$ _____

II. Type Of Roof Covering

1. Flat-Build Up _____ 2. Wood Shingles/Shakes _____ 3. Asphalt/Fiberglass Shingles _____ 4. Tile _____

5. Slate _____ 6. Other _____ 7. Sheathing Solid _____ Spaced _____

III. Pitch of Roof _____ /12 Number of Squares _____ Underlayment _____

Size of Fastenings-Nails _____ Staples _____

IV. Flashing:

Valley _____ Rakes _____ Copings _____ Eaves Drip _____ Gravel Stop _____

V. Is Removal of Any Hazardous Materials A Part Of This Project? _____

I hereby certify that I understand all the items listed above are part of the conditions of the permit. Minor repairs may be performed but all structural repairs shall be performed by a Contractor licensed for the work involved.

The inspections shall follow requirements listed in the Florida Building Code.

1. Sheathing
2. Dry-In
3. Final

Signature Of Owner Or Roofer

Date

State Number

County Number

I do hereby certify that any work subcontracted on this job, are duly certified and licensed contractors, and hold a Certificate Of Competency Card in Highlands County.