

ROOFING PERMIT APPLICATION

(APPLY ONLINE ONLY)

<p>Project Address:</p> <p>Parcel #</p>	<p>Legal Description (or Tax #):</p> <p>Addition: _____</p> <p>Block: _____</p> <p>Lot(s): _____</p>	<p>Office Use Only</p> <p>Permit# _____</p> <p>Associated Permits: _____</p> <p>_____</p> <p>_____</p>
<p>SF Residential <input type="checkbox"/> Commercial <input type="checkbox"/> MF Residential <input type="checkbox"/> Bed & Breakfast* <input type="checkbox"/></p> <p>* B&Bs located in Historic District may require design review</p>		

Property Owner:

Name: _____

Address: _____

City/St/Zip: _____

Phone: _____

Email: _____

Lender Information:

Lender information must be provided for projects over \$5,000 in valuation per RCW 19.27.095.

Name: _____

Project Valuation: _____

Contractor:

Name: _____

Address: _____

City/St/Zip: _____

Phone: _____

Email: _____

State License #: _____ Exp: _____

City Business License #: _____

Scope of Work:

Existing roofing material type: _____

Number of existing roof layers: _____

Square footage of roof: _____

Tear off? Y___ N___

Replacing sheathing? Y___ N___

Replacing / altering rafters or trusses? Y___ N___

If "yes" a roof framing plan is required.

Is the structure located within 200 feet of a fresh or saltwater shoreline? Y___ N___

Will work take place on or near the public right-of-way? Y___ N___

If yes, provide a site plan and pedestrian protection plan.

Was the home built before 1940? Y___ N___

(*see 2nd page)

New Roof Type:

<input type="checkbox"/> Composition	<input type="checkbox"/> Metal
<input type="checkbox"/> Torchdown or Hot Mop	<input type="checkbox"/> Other
<input type="checkbox"/> Cedar shingles (*see 2 nd page)	<input type="checkbox"/> Cedar shakes (*see 2 nd page)

Venting type (check all that applies):

<input type="checkbox"/> Roof	<input type="checkbox"/> Gable End	<input type="checkbox"/> Eave/soffit
<input type="checkbox"/> Ridge	<input type="checkbox"/> Other	

Brand and color of new roofing material: _____

Type of new underlayment: _____

The above information as well as installation instructions must be available at the job site.

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Are you replacing gutters? Y___ N___

If “Yes” submit spec sheets for the product that include installation instructions.

Application fee: \$118.60

Commercial Re-roof Fee Based on Project Valuation

I hereby certify that the information provided is correct, that I am either the owner or authorized to act on behalf of the owner and that all activities associated with this permit will be in accordance with State Laws and the Port Townsend Municipal Code.

Print Name: _____

Signature: _____

Date: _____

*If the home is historic (built before 1940) with any existing type of roofing other than composition, an approved color and product can be used to bypass Historic Preservation Committee Review:

Malarkey Highlander CS	in Natural Wood, Storm Grey or Weathered Wood
Malarkey Legacy	in Natural Wood, Storm Grey or Weathered Wood
Malarkey Vista AR	in Weathered Wood, Antique Brown or Heather
Pabco Premier 30	in Weathered Wood or Driftwood
Pabco Premier 40	in Weathered Wood or Driftwood
Pabco Premier 50	in Weathered Wood or Driftwood
Pabco Premier Advantage	in Weathered Wood or Driftwood
Owens-Corning	
Oakridge Shingles (30 year)	in Driftwood
GAF/ELK	
Timberline Prestique 30	in Weathered Wood or Fox Hollow Gray
Timberline Prestique 40	in Weathered Wood or Cool Weathered Wood
Timberline Prestique Lifetime	in Weathered Wood or Fox Hollow Gray
IKO	
Cambridge LT	in NW Driftwood or Weatherwood
Roofshake 40	in NW Driftwood or Weatherwood
Cambridge 30 AR & 30	in NW Driftwood or Weatherwood

