



1000 Englewood Parkway \* Englewood, CO 80110 \* 303-762-2356\*303-762-2357 \* Fax: 303-762-2362

# ROOFING PERMIT APPLICATION or SIDING PERMIT APPLICATION (please circle)

Job Address: \_\_\_\_\_

Occupant: \_\_\_\_\_ Occupant Phone: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Registration No. \_\_\_\_\_ Contractor Phone: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

\_\_\_\_ Residential – single family or duplex (circle one) single story or two story (circle one)

\_\_\_\_ Detached Garage \_\_\_\_ Commercial \_\_\_\_ Multi-Family

### \*\*\*\*ROOFING INFORMATION:

Materials: \_\_\_\_\_

Total Squares: \_\_\_\_\_ Roof Pitch: \_\_\_\_\_ Stories \_\_\_\_\_ (inspector has an 8ft ladder– contractor ladder set required for over one story)

Valuation: \_\_\_\_\_

### \*\*\*\*SIDING INFORMATION:

Materials: \_\_\_\_\_

Squares: \_\_\_\_\_

Valuation: \_\_\_\_\_

I certify that all information listed herein is accurate, to the best of my knowledge, and understand that any misrepresentation of facts on this application may result in the suspension or revocation of any permit issued, or the denial of the issuance of a permit

Print Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_