

# CITY OF PUNTA GORDA

## ROOF PERMIT APPLICATION

**BOTH SIDES OF PERMIT APPLICATION MUST BE COMPLETED**

		CODE	DATE:	PERMIT#:										
JOB ADDRESS:		UNIT #:	BUILDING #:	PHASE #:										
BLOCK:	LOT:	SECTION:	SUBDIVISION:	PROJECT/CONDO NAME										
OWNER NAME:	MAILING ADDRESS	ZIP	PHONE											
CONTRACTOR'S BUSINESS NAME:	MAILING ADDRESS	ZIP	PHONE											
CONTRACTOR'S STATE REGISTRATION NO.:		CONTRACTOR'S CITY CERTIFICATE NO.:												
ARCHITECT:		ENGINEER:												
USE OF BUILDING: <input type="checkbox"/> SINGLE FAMILY	<input type="checkbox"/> DUPLEX	<input type="checkbox"/> MULTI-FAMILY	<input type="checkbox"/> COMMERCIAL, DESCRIBE											
ZONING DISTRICT	FLOOD ZONE	FLOOD ELEVATION	LOT TYPE											
TYPE OF ROOF (MATERIAL)	NEW	RE-ROOF	REPAIR											
DESCRIPTION OF WORK - SPECIFICALLY:														
			VALUATION OF WORK:											
<p style="text-align: center;"><b>NOTICE</b></p> <p>This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.</p> <p><b>I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.</b></p>			<p><b>PERMIT FEES:</b></p>											
<p>_____ CONTRACTOR (QUALIFIER) SIGNATURE</p> <p>_____ SIGNATURE OF OWNER (IF OWNER/BUILDER)</p>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>ACCEPTED BY:</td> <td>DATE</td> </tr> <tr> <td>PLANS CHECKED BY:</td> <td>DATE</td> </tr> <tr> <td>APPROVED FOR ISSUANCE BUILDING:</td> <td>DATE</td> </tr> <tr> <td>APPROVED ZONING:</td> <td>DATE</td> </tr> <tr> <td>APPROVED HISTORIC:</td> <td>DATE</td> </tr> </table>		ACCEPTED BY:	DATE	PLANS CHECKED BY:	DATE	APPROVED FOR ISSUANCE BUILDING:	DATE	APPROVED ZONING:	DATE	APPROVED HISTORIC:	DATE
ACCEPTED BY:	DATE													
PLANS CHECKED BY:	DATE													
APPROVED FOR ISSUANCE BUILDING:	DATE													
APPROVED ZONING:	DATE													
APPROVED HISTORIC:	DATE													
<p><i>FAILURE TO READ AND UNDERSTAND THE CONDITIONS AND GENERAL PROVISIONS, DOES NOT RELIEVE THE APPLICANT FROM HIS OBLIGATIONS AS STATED ABOVE. IF ANY CONDITION OR PROVISION IS NOT FULLY UNDERSTOOD, THE APPLICANT SHOULD REQUEST CLARIFICATION BEFORE SIGNING THIS APPLICATION.</i></p>														
<p>PERMIT VALIDATION CK# _____ RECEIPT: _____ CASH: _____ DATE: _____</p>														

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

JOB ADDRESS: \_\_\_\_\_

**ROOF CATEGORY**

\_\_\_ Low slope Application      \_\_\_ Tile      \_\_\_ Other  
\_\_\_ Asphalt/Fiberglass shingles      \_\_\_ Metal

**ROOF TYPE**

\_\_\_ New    \_\_\_ Re-roofing    \_\_\_ Recovering    \_\_\_ Repair

Exposure category \_\_\_\_\_

Building Classification Category \_\_\_\_\_

**SLOPED SYSTEM DESCRIPTION**

