

**Town of Poughkeepsie
Single Family Home
Roofing Permit Application**

Received:

Permit # _____

Property Address: Street: _____ City: _____ Zip: _____

Grid Number: _____ Zoning District: _____

Owners Name: _____ Phone: (H) _____ (W) _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Builders Name: _____ Phone: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

1) Attach Contractors workman comp. C105.2 or U26.3 or certificate of exempt

Project Description: _____

The Owner/Applicant agrees to conform to all applicable laws of this jurisdiction, adhere to the plans and specifications affixed hereto and permit Building Department personnel to perform required inspections.

Applicant's Name: _____ *(attach letter of agency)*

Owner/Applicant Signature: _____ *Date* _____

Application fee: _____ 75.00

Application must be submitted with attached Roof Covering Permit Information Sheet

ROOF COVERING PERMIT INFORMATION SHEET

PROPERTY LOCATION: _____

CONTRACTOR NAME: _____ PHONE: _____

APPLICANT NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

(YOU MUST ANSWER ALL OF THE QUESTIONS BELOW)

Yes No All water soaked roof coverings will be removed prior to installing new roof covering.

Yes No Any deteriorated sheathing will be replaced prior to installation of new roof covering.

Yes No Existing roof coverings consisting of wood shake or shingle, slate, clay, cement or asbestos cement tile will be removed prior to installing new roof covering.

Yes No Existing roof coverings will be removed prior to installing new roof covering where the existing roof has two or more applications of any type of roof covering.

Yes No New roof covering, flashing and valleys will be installed in accordance with the Residential Code of New York State.

Yes No An Ice Barrier will be installed to extend from the lowest edges of all roof surfaces to a point at least 24 inches inside the exterior wall line of the building.

If you answered "No" to any of the above questions you must submit the manufacturer's installation instructions and a detailed scope of work to the Building Department Office for additional review and approval.

The undersigned hereby certifies that the work will be performed in accordance with the Manufacturer's installation instructions and in compliance with the New York State Uniform Fire Prevention and Building Codes.

SIGNATURE

DATE