



Roofing Permit Application

Permit No. _____

Office Use Only

Cash _____
 Check _____
 Credit Card _____
 Received \$ _____
 Receipt No _____
 Date: _____

Project Address: _____			
Legal Description	Lot #	Block #	Subdivision: (If un-platted, submit copy of warranty deed)
Owner of Property: _____			
Name		Phone #	
Mailing Address: _____			
Street #		City	State Zip
Contractor/Applicant: _____			
Name		Phone #	
Mailing Address: _____			
Street #		City	State Zip
Existing Use of Property: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other		State license number:	
Permit Information	<input type="checkbox"/> Replace Decking <input type="checkbox"/> Overlay Decking (new lbs. per SQ FT _____ Span on roof rafters _____ type and grade _____) <input type="checkbox"/> Re use roof covering (tile, metal, slate, etc.) <input type="checkbox"/> Roof covering replacement only Type of roof covering _____		Estimated Cost:

I hereby certify that the statements in this application and the attachments hereto are true and correct and that the property owner has given permission for this work to proceed. I further certify that all construction work under this permit will conform to the attached plans, specifications and drawings and to the Codes and Ordinances of the City of Choctaw. I certify that the code official or the code official's authorized representatives shall have the authority to enter area covered by such permit at any hour to enforce the provisions of the code(s) applicable to such permit.

Printed Name: _____ **Signature:** _____

Date: _____

Do Not Write below This Line—Office Use Only	
<input type="checkbox"/> APPROVED _____ 20____	
<input type="checkbox"/> DENIED _____ 20____	
REASON: _____ BY _____	