

**Application for Roofing Permit
Highlands County, Florida**

Owner _____
Address _____
City _____
Phone _____

Roofing Contractor _____
Address _____
City _____
Phone _____

Legal Description Of Property:

Strap: C- _____ - _____ - _____ - _____ - _____ Map# _____ Subdiv# _____ Lot _____ Block _____
Address: _____ Legal Desc _____ Minimum Lot Area _____
Unit/Sec _____ Property Zoned _____ Minimum Living Area _____ Approved _____ Disapproved _____

Zoning Director

I. **New Construction** _____ Repairs: _____ Roof Over (Mobile Home only): _____ Remove Roofing & Replace: _____
Value of Work [Contract Price] \$ _____

Permit Fee	\$ _____
Certificate of Completion	\$ _____
State Surcharge	\$ _____
Total:	\$ _____

II. Type Of Roof Covering

1. Flat-Build Up _____ 2. Wood Shingles/Shakes _____ 3. Asphalt/Fiberglass Shingles _____ 4. Tile _____
5. Slate _____ 6. Other _____ 7. Sheathing Solid _____ Spaced _____

III. **Pitch of Roof** _____/12 Number of Squares _____ Underlayment _____
Size of Fastenings-Nails _____ Staples _____

IV. Flashing:

Valley _____ Rakes _____ Copings _____ Eaves Drip _____ Gravel Stop _____

V. **Is Removal of Any Hazardous Materials A Part Of This Project?** _____

I hereby certify that I understand all the items listed above are part of the conditions of the permit. Minor repairs may be performed but all structural repairs shall be performed by a Contractor licensed for the work involved.

The inspections shall following requirements listed in the Florida Building Code.

1. Sheathing
2. Dry-In
3. Final

Signature Of Owner Or Roofer

Date

State#

County#

I do hereby certify that any work subcontracted on this job, Permit# _____ are duly certified and licensed contractors, and hold a Certificate Of Competency Card in Highlands County.

Contractor or Owner