CITY OF TALLAHASSEE — ROOFING PERMIT APPLICATION

Date: _____ **Call Back #:**_____ **Fax Back #:** _____

Trust Acct #: _____ **Roofing Permit #: TBR** _____

Building Permit #: TBB_____

Improvements with a value less than $300.00 do not require a Roofing Permit. ANY JOB VALUE GREATER THAN $2,500.00 THAT IS NOT ASSOCIATED WITH A BLDG PERMIT **WILL REQUIRE A NOTICE OF COMMENCEMENT** BEFORE FIRST INSPECTION.

Roofing Contractor:_____ **License #:**_____

Job Address: _____ **Cost of Imp: $**_____

Owner: _____ **Parcel ID #:** _____

TYPE OF IMPROVEMENT	CLASS OF BUILDING (Proposed Use)		
☐ 01 NEW BUILDING	☐ 01 ONE FAMILY	☐ 09 WAREHOUSE	☐ 24 PUBLIC UTILITY
☐ 02 ADDITION	☐ 02 TWO FAMILY	☐ 15 BUSINESS	☐ 25 SCHOOL, LIBRARY, EDUCATION
☐ 03 ALTERATION / REPAIR	☐ 03 TRIPLEX	☐ 16 AMUSEMENT, RECREATIONAL	☐ 26 STORES, MERCANTILE
☐ 31 CHANGE OF USE	☐ 04 QUADRIPLEX	☐ 17 CHURCH, OTHER RELIGIOUS	☐ 28 DAY CARE
	☐ 05 MULTI FAMILY _____units	☐ 18 INDUSTRIAL	☐ 30 MULTI - USE
	☐ 06 ROOMING HOUSE _____units	☐ 19 PARKING GARAGE	☐ 32 COMM ACCESSORY STRUCTURE
	☐ 07 HOTEL, MOTEL _____units	☐ 20 SERV. STATION, REP GARAGE	☐ 37 RESTAURANTS
	☐ 08 DORMITORY _____units	☐ 21 HOSPITAL, INSTITUTIONAL	☐ ___OTHER SPECIFY _____
	☐ 12 SINGLE FAMILY ATTACHED	☐ 22 OFFICE, PROFESSIONAL	

☐ New 1 & 2 Family Roof $14.00 - # of units_____

If townhouse has attached units > than 4 fee is $ 41 each

☐ 1 Family Detached Reroof $148.00

☐ 1 Family Attached & 2 Family Reroof $54.00

☐ Commercial Asphalt or Fiberglass Shingles

$54 appl plus $0.0135 sq ft. max $268 **SQ FT**_____

☐ Commercial all Other Roof Types

$54 appl plus $ 0.020 sq ft. max $268 **SQ FT** _____

3% State Surcharge or a minimum $4.00 and a $2.50 Training Surcharge will be added to each permit issued.

☐ **SHINGLE** ☐ **TILE** ☐ **METAL ROOF**

Roof Slope: _____" in 12"

SLOPES LESS THAN 4" in 12" SHALL BE APPROVED BY CODES REVIEW STAFF BEFORE PERMIT ISSUANCE

Roof Decking Material:_____

Underlayment Material _____

Asphalt Shingles: comply w/ASTM D 225 or ASTM D 3462

Manufacturer _____

2014 Florida Product Approval # FL _____

*****RE ROOF UNDERLAYMENT SHALL BE ASTM D 226 TYPE I OR II, ASTM D 4869 TYPE II OR IV OR APPROVED SYNTHETIC *****

*****THE ROOF BEING REROOFED HAS POSITIVE DRAINAGE AS DEFINED IN SECTION 1502.1, FBC-B 5thEdition (2014)*** ☐***YES*** ☐***NO***

COT Staff Approval:_____

BUILT-UP ROOFS:

Type Roof Deck:_____

Base Ply:_____

*****THE ROOF BEING REROOFED HAS POSITIVE DRAINAGE AS DEFINED IN SEC. 1502.1, FBC-B 5thEdition (2014)*** ☐***YES*** ☐ ***NO***

2014 Florida Product Approval # FL _____

COT Staff Approval:_____

SINGLE PLY BRAND OR MODIFIED BITUMEN:

Brand Name:_____

Manufacturer:_____

*****THE ROOF BEING REROOFED HAS POSITIVE DRAINAGE AS DEFINED IN SEC. 1502.1, FBC-B 5thEdition (2014)*** ☐***YES*** ☐ ***NO***

2014 Florida Product Approval # FL _____

COT Staff Approval:_____

CONTRACTORS PLEASE READ: Florida Statues 489-113(3)(b) indicates that: 'A general, building, or residential contractor shall not be required to subcontract the installation of wood shingles, wood shakes, asphalt or fiberglass shingle roofs on a new building of his own construction. The contractor obtaining this roof permit shall use his/hers own employees (personnel presently on the payroll). Florida Statutes: 489.113(3)(g) indicates that: 'No general, building or residential contractor certified after 1973 shall act as, hold himself out to be, or advertise himself to be a roofing contractor unless he is certified or registered as a roofing contractor.' Last certified contractor # that is permitted to pull roofing permit is 0007837.

_____/_____ _____

SIGNATURE of the Licensee OR Authorized Agent PRINT NAME Date