



Re Roof Permit Fee \$74.70
State Code Fee \$ 6.50
Total Fee \$81.20
Receipt # _____

FOR STAFF USE ONLY

Permit Number _____
Application Date _____

RE-ROOF PERMIT APPLICATION- RESIDENTIAL

(Manufactured Homes are regulated through L&I and do not require a city permit but do require a permit from L&I)

Site Address: _____ Parcel Number: _____
Owner: _____ Phone Number: _____
Address: _____ City: _____ State/Zip Code: _____

CONTRACTOR INFORMATION:

Contractor: _____ Phone Number: _____
Address: _____
WA State Contractor's License #: _____ Expiration Date: _____
City Business License # _____

Type of Roofing: _____ Number of Existing Layers: _____ Number of Squares: _____
New Plywood Sheathing ____ Yes ____ No (or square footage of building)
Work Schedule to begin: _____ Work Schedule to End: _____
Cost of Construction: \$ _____

The following is required for NON-Residential Buildings:

Class of Roofing: ____ A ____ B ____ C
____ Building Square footage _____
____ A copy of the quote
____ Occupancy of Building: ____ Office ____ Retail ____ Church ____ Restaurant ____ School ____ Multi – Family

Basis for Roof System Approval:

Is the existing structural design sufficient to sustain the weight of the proposed new roof? ____ Yes ____ No
If not, please provide roof plan to substantiate adequate stability for a heavier roof system.
I understand the following inspections are required: (1) Tear-off/pre inspection prior to installing new roof coverage (2) Final Inspection. IT IS UP TO THE CONTRACTOR TO CONTACT THE BUILDING OFFICIALS OFFICE TO SET UP INSPECTIONS INCLUDING THE FINAL INSPECTION

I agree to perform all work in accordance with the Ephrata Municipal Code requirements. I acknowledge that all information on this form is true and correct.

SIGNATURE(Owner/Contractor) _____ DATE: _____