



APPLICATION FOR NEW & RE-ROOFING PERMIT

Date: _____

1. Owner Name & Address:

2. Roofing Contractor Name & Address:

Phone # _____

OK Lic # _____
Phone # _____

2. Job Location Address: _____

3. Job Site Details Residential Commercial (Commercially Endorsed Yes No)

Re-Roof Type: Asphalt Metal Other

Total current layers? _____

How many layers will be removed? _____

New Type: Asphalt Metal Other

Signature of Applicant

I understand Permit approval shall not be deemed to grant authorization for any work to be done in any manner in violation of the provisions of the International Building, Residential code or any other laws or ordinances of this jurisdiction.

Signature of Applicant

I understand that the City of Miami enforces the current roofing regulations and contractor's registration act per the Oklahoma Construction Industries Board.

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City Official Approval

Date

\$ _____
Fee

Accepted by

Permit No.