



ArlingtonPermits.com  
THE ONE START CENTER

# Residential Building Permit Application - REROOF ONLY

**Primary Structures**  
(DO NOT FAX OR E-MAIL APPLICATION)  
Apply online at arlingtonpermits.com



Please **print** clearly:

Applicant's Name\*: \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_ Email\*: \_\_\_\_\_

\*A legible copy of a current government photo ID is required to be submitted by the applicant.

\*Plan review comments will be delivered to Email provided above (Please verify email).

Project Address: \_\_\_\_\_ Suite: \_\_\_\_\_

Please check only one:

**Single-family & Townhouse**

**Duplex**

**Two-family**

Please check:

**Remodel/Alterations/Repair (roof replacement only)**

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local ordinances regulating construction, the performance of construction or the use of any land or buildings.

Print Name of Permit Applicant \_\_\_\_\_ DATE \_\_\_\_\_

Signature of Permit Applicant \_\_\_\_\_

Applicant is: \_\_\_ Contractor, \_\_\_ Homeowner or \_\_\_ Authorized Agent

If applicant is contractor, then name of company: \_\_\_\_\_

If applicant is contractor, then has a Business Registration (BR) been applied for: \_\_\_YES \_\_\_NO

If applicant is Homeowner, then has a Homeowner Registration (BR) been applied for: \_\_\_YES  
\_\_\_NO

**For “Remodel/Alterations/Repair” (Roof replacement only) of One- and Two-Family Home**

Project Scope:

Roof Replacement only

Declared Fair Market Construction Valuation: \$ \_\_\_\_\_

Number of Stories: \_\_\_\_\_

Check only one – type of roof:

Sloped roof with attic below; Slope \_\_\_\_ / 12

Flat (low slope) roof without attic below; Slope \_\_\_\_ / 12

*Note: if this box is checked then please check one of the following:*

None of the occupied space is heated and/or cooled

Some or all of the occupied space is heated and/or cooled

Flat roof or roof/ceiling assemblies; Slope \_\_\_\_ / 12

*Note: if this box is checked then please check one of the following:*

None of the occupied space is heated and/or cooled

Some or all of the occupied space is heated and/or cooled

Check one only for the existing roof covering	Check one only for the replacement roof covering
<input type="checkbox"/> Asphalt/fiberglass shingles	<input type="checkbox"/> Asphalt/fiberglass shingles
<input type="checkbox"/> Wood Shingles/Wood Shakes	<input type="checkbox"/> Wood Shingles/Wood Shakes
<input type="checkbox"/> Clay and/or concrete tile	<input type="checkbox"/> Clay and/or concrete tile
<input type="checkbox"/> Metal Roof Shingle	<input type="checkbox"/> Metal Roof Shingle
<input type="checkbox"/> Mineral-surfaced roll roofing	<input type="checkbox"/> Mineral-surfaced roll roofing
<input type="checkbox"/> Slate	<input type="checkbox"/> Slate
<input type="checkbox"/> Built up	<input type="checkbox"/> Built up
<input type="checkbox"/> Metal roof panel	<input type="checkbox"/> Metal roof panel
<input type="checkbox"/> TPO	<input type="checkbox"/> TPO
<input type="checkbox"/> Sprayed polyurethane foam roofing	<input type="checkbox"/> Sprayed polyurethane foam roofing
<input type="checkbox"/> Liquid-applied coatings	<input type="checkbox"/> Liquid-applied coatings
<input type="checkbox"/>	<input type="checkbox"/>

Do you intend to remove all of the existing layers: \_\_\_\_\_ YES \_\_\_ NO

If yes, then indicate number of existing layers: \_\_\_\_\_

Are you replacing and/or installing decking? \_\_\_\_\_ YES \_\_\_ NO

If yes, then indicate what thickness: \_\_\_\_\_