

Riegelsville Borough

615 Easton Road · PO Box 551 · Riegelsville, PA 18077-0551

Phone: 610-749-2909 · Fax: 610-749-0610 Email: zoning@riegelsville.org

Re-Roofing Permit Application

Commercial Residential

Property and Owner Information:

Location of Property: _____

Current Use of Property: _____

Property Owner: _____

Address: _____

Phone Number: _____

Contractor Information (attach insurance certificate): PA HIC # _____

Business Name: _____

Address: _____

Contact Person: _____

Phone Number: _____

Project Information:

Project Cost: _____

Roof Pitch: _____

Ventilation Method: _____

Existing Roof Covering: _____

Existing Sheathing: _____

Proposed Roof Covering: _____

If new sheathing proposed: _____

Type and thickness of roofing paper: _____

(Generally, two rows of ice shield should be installed along the bottom of all faces of the roof)

Please state whether existing roof will be removed, or just covered over; a maximum of two roof layers are allowed: _____

Who should be contacted regarding this Application? _____

APPLICANT'S CERTIFICATION:

I hereby certify that all information on this form and attached documentation is true, to the best of my knowledge. Further, I am the owner, or am authorized by the owner to submit this application. In addition, if a permit for the project is issued, I certify that the Riegelsville Borough Building Code Official(s) is/are authorized to enter those areas of the property affected by the permit at any reasonable hour to inspect for compliance with the permit and Pennsylvania Uniform Construction Code.

If Structural repairs are required, such as truss repairs, or installation of new dormers, then a building permit is required in addition to the "Roofing" permit!

APPLICANT'S Signature: _____

Date: _____