

**TOWN OF CONCORD
DEPARTMENT OF CODE ENFORCEMENT
86 FRANKLIN ST., SPRINGVILLE, NY 14141
PHONE: (716) 592-4946 FAX: (716) 794-3382**

ROOF PERMIT APPLICATION

PERMIT NO. _____	
PERMIT DATE: _____	PERMIT FEE: \$50.00
PAID \$ _____ <input type="checkbox"/> CASH <input type="checkbox"/> CHECK # _____	RECEIVED: _____ BY: _____
ZONING DIST. _____	VALUE OF WORK: _____

OWNER: _____ ADDRESS: _____

PHONE _____

LOCATION _____

SIGNATURE: _____

SBL#: _____

NAME OF CONTRACTOR: _____

ADDRESS: _____ PHONE: _____

CERTIFICATE OF INSURANCE ON FILE? YES ___ NO ___

CERTIFICATE OF INSURANCE NEEDED? YES ___ NO ___

NATURE OF PROPOSED WORK:

- CONSTRUCTION OF NEW ROOF
- CONSTRUCTION OF ROOF REPAIR
- ONE STORY
- TWO STORY
- NEW PLYWOOD

ICE SHIELD IS TO BE INSTALLED _____

ROOF:

- | | |
|------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> ASPHALT SHINGLE | <input type="checkbox"/> SINGLE PLY MEMGRANE |
| <input type="checkbox"/> ROLLED ROOFING | <input type="checkbox"/> CORRUGATED PLASTIC |
| <input type="checkbox"/> METAL | <input type="checkbox"/> WOOD SHAKE |

Date: _____

Jeffrey Singleton / Code Enforcement Officer