



CITY OF JACKSONVILLE, FLORIDA
BUILDING INSPECTION DIVISION

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Permit Number

ROOFING PERMIT APPLICATION

Application must be typed or printed legibly in ink. Complete all relevant fields.

OFFICIAL USE ONLY
REAL ESTATE NUMBER DATE ISSUED
STREET NUMBER STREET NAME
TYPE DIRECTION UNIT/SUITE ZONING ZONING APPROVAL
ZONING NOTES
FINAL APPROVAL FEE \$ MINIMUM FEE: YES NO
NOTICE OF COMMENCEMENT REQUIRED? YES NO

PROJECT IDENTIFICATION PROPERTY OWNERSHIP DETAILS
PROJECT NAME TYPE: INDIVIDUAL GOVERNMENT AGENCY BUSINESS
PROJECT CONTACT FULL LEGAL NAME, AGENCY, OR BUSINESS
PROJECT CONTACT PHONE MAILING ADDRESS
PERMIT ASSOCIATIONS? NO YES If yes, list permit data:
BASE PERMIT B
TEMPORARY TAG NUMBER OWNER CONTACT PHONE
OWNER E-MAIL ADDRESS

BUILDING PERMIT ADDRESS (This is the physical address of the actual work location.)
STREET NUMBER STREET NAME TYPE (Ave/Blvd/Court/Road) DIRECTION
UNIT/SUITE ZIP CODE INTERSECTING STREETS
LOT NO. BLOCK SUBDIVISION CITY DEVELOPMENT NUMBER

LICENSED CONTRACTOR AGENCY APPROVALS (IF REQUIRED)
COMPANY NAME PLANNING (HISTORICAL)
NAME JEDC
LICENSE NO.
CITY ID NO.
ADDRESS
PHONE FAX E-MAIL ADDRESS

PROPOSED USE BRIEF DESCRIPTION OF WORK PAYMENT
RESIDENTIAL Unit NON-RESIDENTIAL
Apartments Amusement, Recreational Parking Garage
Carport Church, Other Religious Restaurant
Condominiums Convert Residence School, Library, Educational
Garage Daycare Service Station, Repair Garage
Other Hospital, Institutional Stores, Merchants
Single Family Hotel, Motel, Dormitory Utilities
3 or 4 Families Industrial
Duplex Office, Bank, Professional
Townhouse Other
TYPE OF IMPROVEMENT NATURE OF WORK JOB COST
Check all that apply.
Addition New Building Other Re-Roof
Existing Building Other Roof Repair New Roof
Mobile Home Roof Over Existing
MATERIAL
Build-up Modified Torch Down
Concrete Tile Rolled Roofing Shingles
Clay Tile Rubber Sprayed Polyurethane Foam
Metal Thermoplastic Other

WORKER'S COMPENSATION FLORIDA PRODUCT APPROVAL NO. SLOPE
EXEMPT
INSURER
LEASE EMPLOYEES
EXPIRATION DATE

WARNING TO OWNER—YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

(Only Required for Homeowner Permits) OWNER CONTRACTOR AFFIRMATION (Qualifier only)
Signed: Date:
Before me this day of
in the County of Duval, State of Florida, has personally appeared
herein by himself/herself and
affirms all statements and declarations herein are true and accurate.
Notary Public at Large, State of , County of
Personally Known or Produced Identification
ID Type
I attest the Worker's Compensation information provided on this permit application is true and correct and that the applicant is in full compliance with the State of Florida Worker's Compensation laws.
Signed: Date:
Before me this day of
in the County of Duval, State of Florida, has personally appeared
herein by himself/herself and
affirms all statements and declarations herein are true and accurate.
Notary Public at Large, State of , County of
Personally Known or Produced Identification
ID Type

PERMIT REQUIREMENTS