



EL RENO
WE'RE PROUD OF OUR *routes*.

**Community Development
Department**

101 N. Choctaw El Reno, OK 73036 • (405)-295-9317

Roofing Permit Application

APPLICANT INFORMATION

Owner Name: _____ Owner Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Project Address (if different): _____ City: _____ State: _____ Zip: _____

OR (if un-platted): Attach legal description of property to application.

TYPE OF STRUCTURE

Primary Structure (House, Duplex) Addition to Existing Structure Accessory Structure

WORK BEING PERFORMED

Complete Tear-Off & Re-Roof of structure (Tear-Off required if more than 2 layers)

Repair Roof Structure

Over-lay

ROOF COVERING

What type of covering is currently on the roof? _____

When the job is complete how many layers will there be? _____

What type of roof covering will be used for this job? _____

Estimated Value of Projects? \$ _____

CONTRACTOR INFORMATION

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____

CERTIFICATION

I hereby affirm that I have been authorized by the property owner(s) to apply for and undertake all work described, and that the entire project conforms to the Code of the City of El Reno, Oklahoma, State Statutes, and all Federal Regulations. I acknowledge that only contractors holding state and local licensing may perform electrical, mechanical, and plumbing work. I understand that only the work described in the plans is eligible for permitting, and I attest that all minimum required insurance will be maintained during construction.

I attest to the truth and correctness of all facts and information presented in this application and agree to pay all fees as required.

Signature: _____ Printed Name: _____ Date: _____