

# RESIDENTIAL ROOF PERMIT APPLICATION

PERMIT # \_\_\_\_\_

TOWNSHIP OF WAKEFIELD BUILDING INSPECTIONS

Donals 'Butch' Saari  
(906-364-1277)

Authority: R105.1

Completion: Mandatory to obtain permit.

Penalty: Permit cannot be issued.

1. JOB LOCATION:

NAME OF OWNER/AGENT: \_\_\_\_\_

HOMEOWNER PHONE NUMBER (required): \_\_\_\_\_

ADDRESS (Job location): \_\_\_\_\_  
Number, Street, City, State, Zip

2. CONTRACTOR/HOMEOWNER INFORMATION:

INDICATE WHO THE APPLICANT IS: \_\_\_\_\_ Contractor \_\_\_\_\_ Homeowner

NAME: \_\_\_\_\_

BUILDERS LICENSE NUMBER (Please attach copy with permit.): \_\_\_\_\_ EXP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Number, Street, City, State, Zip

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

FEDERAL EMPLOYER ID NUMBER (or reason for exemption): \_\_\_\_\_

WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption): \_\_\_\_\_

All copies of license and insurance are on file: \_\_\_\_\_ Yes \_\_\_\_\_ Provided with application.

3. TYPE OF JOB/FEE/COST: (This permit application is for single or multi-family homes only)

\_\_\_\_\_ Single Family \$75

\_\_\_\_\_ Multi Family (Duplex) \$75

\_\_\_\_\_ Complete Tear Off

\_\_\_\_\_ Shingle Over (requires a site visit prior to permit issue)

\_\_\_\_\_ Metal Standing Seam

\_\_\_\_\_ Metal Sheet (screw down)

\_\_\_\_\_ Membrane

Project Cost \$ \_\_\_\_\_

Number of Squares being installed: \_\_\_\_\_

4. APPLICANT SIGNATURE: (Homeowner signature indicates compliance with section VI. Homeowner Affidavit)

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subject to civil fines.

\_\_\_\_\_  
Signature of Licensee or Homeowner

\_\_\_\_\_  
Date