



THE CITY OF MAYFIELD HEIGHTS

6154 Mayfield Road - Mayfield Heights, OHIO 44124-3296
 Phone: 440-442-2107 Fax: 440-442-7662

REQUEST FOR COMMERCIAL ROOFING PERMIT

PERMIT FEE: BASE Fee: \$100.00 plus \$1 per every \$100 valuation plus 3% state surcharge

JOB LOCATION (address = no. & street):	
JOB NAME (business/building name):	
BUILDING NO:	BLDG DESCRIPTION: (store, church, retail, etc.)
Property Owner:	
Owner's Address	
City, State, Zip	Phone:

PLEASE COMPLETE THE FOLLOWING:

Size of existing roof:	Sq. Ft.	Area being replaced:	Sq. Ft.
Are all the existing roofing materials being removed to the structural deck?			
What type of roofing system currently exists?	Built-up	Membrane	Other:
What type of roofing system is being installed?	Built-up	Membrane	Other:
Will new roofing materials reduce or increase the current dead load?	Increase	Decrease	No Change
Estimated cost of construction:			
If loading is to be increased, has a structural engineer reviewed all allowable loads?	Yes	No	
<i>If Yes, attach an Engineer's report.</i>			

Additional Description:

I attest that the construction will comply with all applicable building codes and the manufacturer's installation requirements.

CONTRACTOR: (company name)	APPLICANT: (print your name)
ADDRESS:	
EMAIL:	PHONE:
SIGNATURE OF APPLICANT:	DATE:

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