

EAST ROCKHILL TOWNSHIP

1622 North Ridge Road, Perkasie, Pennsylvania 18944

Phone: 215-257-9156 • Email: contact@EastRockhillTownship.org • Website: EastRockhillTownship.org



ROOFING PERMIT APPLICATION

SITE / CONTACT INFORMATION:

SITE ADDRESS Street and City: _____		Primary Contact (check one)
Bucks County Tax Map Parcel ID: _____ USE: <input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential		
Property Owner	Name	<input type="checkbox"/>
	Address	
	Phone _____ Email _____	
Applicant	Name	<input type="checkbox"/>
	Address	
	Phone _____ Email _____	

PROPOSED:

Manufacturer Name	Estimated Cost	\$
Roof Decking to be Replaced? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what type and how thick	
Specify portion of roof to be replaced		
#1: Ice & Water Shield		
#2: Felt Paper _____ Lbs.		
#3: Sheathing		
#4: Ridge Vent		
#5: Penetration/Flashing Material		
#6: Pitch		
#7: Shingle Material Type		

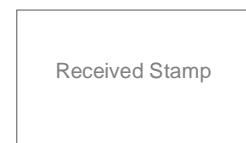
I hereby certify that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

Signature of Owner **Required**

Signature of Authorized Agent

TO BE COMPLETED BY EAST ROCKHILL TOWNSHIP

Residential Permit Fee \$100.00 Received	<input type="checkbox"/> Yes <input type="checkbox"/> No
State UCC \$6.00 Fee Received	<input type="checkbox"/> Yes <input type="checkbox"/> No
Payment Method	<input type="checkbox"/> Credit Card <input type="checkbox"/> Check No. _____ \$ _____
Contractor Certificate of Insurance	<input type="checkbox"/> Yes <input type="checkbox"/> No Expires _____



Approved Denied

BCO Signature