



MASTER APPLICATION

Project Address _____ City _____ ZIP _____

Parcel # _____ Acres _____ Description of Project _____

Area of Existing Structure(s) _____ Sq. Ft. Area of New Structure(s) _____ Sq. Ft.

Estimated Market Value of Project (Building Materials, Plus Labor) \$ _____

Property Owner _____

Full Mailing Address _____

Daytime Phone Number _____ Email _____

Applicant (If NOT the property owner) _____

Full Mailing Address _____

Daytime Telephone _____ Email _____

Contractor Name _____ License # _____

I hereby certify that I am the owner or duly authorized agent of the owner for the purposes of this application. I further certify that I have read and examined this application and know the same to be true and correct. If any of the information provided on this application is incorrect, the permit or approval may be revoked.

Print Name _____ Signature _____ Date _____

Cowlitz County Building & Planning Department, 207 Fourth Avenue N. Kelso, WA 98626 , Phone: (360) 577-3052, FAX: (360) 414-5550
For more information, please contact a Permit Technician. Office hours are Monday through Wednesday, 7:00 am - 6:00 pm and Thursday 8:00 am-6:00 pm. We are closed on Friday. **No Payments received after 5:30**

Initial	Date	Type	Permit #



RE-ROOF SUPPLEMENT

B-6

The following questions shall serve to assist with the review of your permit application. Note that the following questions and information provided does not determine if the existing roof frame is sufficient to support the new roofing material, but rather provide information necessary for permit evaluation and issuance. Also note; the owner shall obtain an amendment to this permit, or a separate permit, for additional work beyond the scope of this permit, e.g. installation of skylights, discovery of damage, or other alterations to the roof system. In addition to this form, Cowlitz County Department of Building and Planning reserves the right to request additional plans and/or information as determined necessary by response to these questions or conditions encountered during field inspection.

Applicant: Please print in ink or type. A Permit Technician will review this application at intake for completeness.

Building Address: _____

Please provide a brief description of your project:

Roof cover materials: (check applicable)

Existing	New	Existing	New
	Asphalt shingle		Metal roof panels
	Clay and concrete tile		Modified bitumen roofing
	Metal roof shingles		Thermoset single-ply roofing
	Mineral-surfaced roll roofing		Thermoplastic single-ply roofing
	Slate shingles		Sprayed polyurethane foam roofing
	Wood shingles		Liquid-applied roofing
	Wood shakes		Photovoltaic shingles
	Built-up roofs		

Roof structural sheathing will be replaced? Yes No

Roof Re-Cover (New roof cover installed over existing roof cover) Yes No

Roof Area / 100 (Number of Squares) = _____

Roof slope: Units vertical /units horizontal: _____

Chimney more than 30" wide as measured perpendicular to the slope of the roof: yes no

Print Name _____ Signature _____ Date _____

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Open Monday-Thursday 7:00 am-6:00 pm - We accept cash, checks, credit/debit cards, except Amex - No payments received after 5:30 pm

Initial	Date	Type	Permit #

Continued on Reverse Side

REROOFING

1. The Permit, Inspection Record Card, and other associated paperwork shall be maintained on site for all inspections.
2. For work beyond the scope of this permit, including discovery of damage, the owner shall amend this permit or obtain a separate permit prior to proceeding with the work. Work shall not be concealed prior to approval.
3. Roof coverings shall be applied in accordance with the manufacturer's material listing and installation instructions.
4. Product identification. Roof-covering materials shall be delivered in packages bearing the manufacturer's identifying marks, approved testing agency labels, and installation requirements.
5. Drip Edge flashing shall be installed on all reroofs and new roof installations consisting of asphalt shingles pursuant to IBC Sec 1507.2.9.3 and IRC 905.2.8.5.
6. A cricket or saddle shall be installed on the ridge side of any chimney or penetration more than 30 inches wide as measured perpendicular to the slope. Cricket or saddle coverings shall be sheet metal or of the same material as the roof covering.
7. Enclosed attic and rafter spaces shall be provided with ventilation pursuant to IBC Sec 1203.2 and IRC Sec R806.
8. Upon request of the inspector, the owner shall provide access to the roof surface for inspection of the building roof system. Access may be provided by a ladder or other method that is compliant with WISHA standards.
9. Call for final inspection when ready.

REROOF SHEATHING INSTALLATION (Residential Only)

1. Roof sheathing shall be installed in accordance with the provisions of IRC Sec R803.
2. Roof sheathing shall not be covered prior to approval.
 - Exception: where access is provided to all attic areas, and approved by the building official.