

EDGMONT TOWNSHIP ROOFING APPLICATION

1000 Gradyville Road, PO Box 267, Gradyville, PA 19039
610-459-1662 phone 610-459-3760 fax

Please Read

- ⇒ This symbol - * - indicates that the information is REQUIRED
- ⇒ If the applicant is not the property owner, the property owner's signature is required.
- ⇒ No work may begin until the building permit has been issued.
- ⇒ No building permit will be released unless all contractors are registered in the Township.
- ⇒ Ice barrier underlayment is required on all roofs where conditioned space is provided.

General Information

*Name of contractor/applicant: _____ *Phone number: _____

*Contractor/applicant's address (street, city, zip code): _____

*Name of property owner: _____ *Phone number: _____

*Location of work (street, city, zip code): _____

Name of subdivision: _____ Lot number: _____ Zoning district: _____ * Tax Parcel Number: _____

* How many existing layers of roof? _____ * Removing old roof? (Circle one) Yes No

* Building permit fee: _____

Uniform Construction Code Education Fee: +\$4.00

Total permit fee: _____

I declare, under the penalties of perjury, that this application (including any accompanying plans and specifications) has been examined by me, and to the best of my knowledge, is a true, correct, and complete application. I have reviewed and agree to comply with all pertinent Township Codes and Ordinances. This application will be reviewed against Township Ordinances and policies ONLY; additional approvals may be required (e.g. approval from Homeowners Associations, etc.)

*Signature of property owner: _____ *Date: _____

*Signature of applicant: _____ *Date: _____

For Official Use Only

Date received: _____ Date complete: _____

Approved by: _____ Date approved: _____