

CITY OF LAKEPORT
225 PARK ST.
LAKEPORT, CA 95453

RE-ROOFING INFORMATION

(TO BE SUBMITTED WITH THE APPLICATION FOR BUILDING PERMIT)

OWNER'S NAME _____

CONTRACTOR _____

PROPERTY LOCATION _____ APN _____

1. Is this to be a re-roof over an existing roof? Yes ___ No ___
If yes, how many layers exist? _____

2. Is the existing roof being stripped? Yes ___ No ___

3. What are the existing roof material(s)?

- | | |
|---|---|
| <input type="checkbox"/> Asphalt shingles | <input type="checkbox"/> Fiberglass |
| <input type="checkbox"/> Wood shingles | <input type="checkbox"/> Asbestos |
| <input type="checkbox"/> Wood shakes | <input type="checkbox"/> Other material |
| <input type="checkbox"/> Tile | <input type="checkbox"/> Combination of the above |

4. Will there be any structural modifications? Yes ___ No ___

5. Is the existing roof sheathing being replaced? Yes ___ No ___

6. Will there be new sheathing over the existing? Yes ___ No ___

7. What materials will be used for the new roof?

- | | |
|---|---|
| <input type="checkbox"/> Asphalt shingles | <input type="checkbox"/> Fiberglass |
| <input type="checkbox"/> Wood shingles | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Wood shakes | <input type="checkbox"/> Other material |

8. Will the new roof will be: ___ Class A, ___ Class B, or ___ Class C?

9. Product name and manufacturer: _____

10. What is manufacturer's warranty? _____

11. What is the square footage of the area being re-roofed? _____ square feet.