

VILLAGE OF NORTHFIELD
APPLICATION FOR PERMIT TO DO ROOFING WORK

(847) 784-3551

Job Address: _____

Owner's Name: _____

Phone Number: (_____) _____

Job Description: _____

(Type of building such as residence, garage, etc. and is it a tear off and re-roof).

Type of Shingle to be used (asphalt, cedar, etc.): _____

[All cedar or wood shingles must be Class "C" Fire Rated]

Start Date: _____ Completion Date: _____

Roofing Contractor: _____

Address: _____

City: _____ Zip Code: _____ Phone Number (____) _____

State License Number: _____

Print Name of Licensed Roofer: _____

Signature of Licensed Roofer: _____

Approved by: _____ Date Approved: _____

Notes: _____

PERMIT FEE **\$35.00**

CONSTRUCTION HOURS SIGN **\$20.00**

Account #01-00-425-4153

TOTAL PERMIT FEE \$ _____

**PER VILLAGE CODE YOU SHALL
USE WASTE MANAGEMENT – NW
ROLL OFF SERVICE
CALL 1-800-796-9696
ASK FOR – IBC (FOR ROLLOFF BOX)**

Ice and Water Shield Inspection and Final Inspection is Required

PERMIT NUMBER: _____