



Roof Permit Application

Permit No: _____

CONTRACTOR/BUILDER : _____

ADDRESS: _____

PHONE NUMBER: _____

FAX NUMBER: _____

PROPERTY OWNER: _____

ADDRESS: _____

PHONE NUMBER: _____

FAX NUMBER: _____

SQUARE FEET: _____

ESTIMATED COST: _____

SUB-CONTRACTORS

ROOFER: _____

GUTTERING: _____

**PLEASE BE SURE TO CALL CITY HALL (417-649-7237) TO SCHEDULE UNDERLAYMENT AND FINAL INSPECTIONS
PLEASE MAKE INQUIRIES TO THE BUILDING INSPECTOR REGARDING CURRENT CODE.**

I THE UNDERSIGNED ACKNOWLEDGE THAT I HAVE RECEIVED THE PERTINENT INFORMATION REGARDING MY PERMIT APPLICATION AND AM AUTHORIZED BY THE OWNER OF RECORD TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT.

I REALIZE THE IMPORTANCE OF READING AND UNDERSTANDING THIS INFORMATION.

NAME: _____

CONSTRUCTION SITE: _____

DATE: _____

CITY CLERK: _____

DATE: _____

BUILDING INSPECTOR: _____

DATE: _____

CITY ADMINISTRATOR: _____

DATE: _____

SUPERINTENDENT OF
PUBLIC WORKS _____

DATE: _____