



RIO BLANCO COUNTY ROOFING PERMIT APPLICATION

BOX 599 MEEKER, CO 81641

PHONE: (970) 878-9450 FAX: (970) 878- 9451

Building Permit

BUILDING

DIV _____

ADDRESS OF CONSTRUCTION SITE _____ OR SUBDIVISION _____ LOT# _____

OR SEC _____, T _____, R _____ ASSESSORS PARCEL# _____

PROPERTY OWNER _____ PHONE _____

MAILING ADDRESS _____

BUILDING OWNER _____ PHONE _____

MAILING ADDRESS _____ EMAIL ADDRESS _____

APPLICANT NAME	MAILING ADDRESS, CITY, STATE, ZIP	EMAIL	PHONE
GENERAL CONTRACTOR	MAILING ADDRESS, CITY STATE, ZIP	EMAIL	PHONE
MECHANICAL CONTRACTOR	MAILING ADDRESS, CITY, STATE, ZIP	EMAIL	PHONE
ELECTRICAL CONTRACTOR	MAILING ADDRESS, CITY, STATE, ZIP	EMAIL	PHONE
PLUMBING CONTRACTOR	MAILING ADDRESS, CITY, STATE, ZIP	EMAIL	PHONE

TYPE OF ROOFING PROJECT:	PERMIT FOR:
<input type="radio"/> SINGLE FAMILY <input type="radio"/> MULTIPLE FAMILY <input type="radio"/> COMMERCIAL <input type="radio"/> INDUSTRIAL <input type="radio"/> TOWN OF RANGELY OTHER _____	<input type="radio"/> NEW ROOF <input type="radio"/> TOTAL TEAR OFF/REROOF <input type="radio"/> PARTIAL TEAR OFF/REROOF <input type="radio"/> OVERLAY ONLY <input type="radio"/> REPAIR MATERIAL _____ ROOF PITCH _____ DECK MATERIAL (if applicable) _____ NEW INSULATION (if any) Type: _____ R Value _____

FLOOD HAZARD AREA
____ YES ____ NO ____ TBD ____ UNKNOWN

PROJECT DESCRIPTION AND USE: _____

ESTIMATED TOTAL COST OF PROJECT (FOR WHICH PERMIT IS REQUESTED) _____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE, AND I UNDERSTAND AND AGREE TO ALL REQUIREMENTS, TERMS AND CONDITIONS GOVERNING THIS TYPE OF WORK IN RIO BLANCO COUNTY.

SIGNATURE OF OWNER

DATE

SIGNATURE OF AUTHORIZED AGENT

DATE