



# Roof Permit Application

Applications can be emailed to the permits department at [permits@cleveland.texas.gov](mailto:permits@cleveland.texas.gov)

**Referenced: 2015 IBC Sec. 1511 Reroofing 1511.1 General.** Materials and methods of application used for recovering or replacing an existing roof covering shall comply with the requirements of Chapter 15 Roof Assemblies and Rooftop Structures.

**Referenced: IRC R801.2 Requirements.** Roof and ceiling construction shall be capable of accommodating all loads imposed in accordance with Section R301 and of transmitting the resulting loads to the supporting structural elements. Refer to 2015 IBC and IRC for full requirements details.

**Project Address** \_\_\_\_\_ (select one) \_\_\_ Commercial \_\_\_ Residential

**Business Name** (commercial property only) \_\_\_\_\_

**Total sq ft of Roofing Project:** \_\_\_\_\_ **Total Construction Job Cost:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Email** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Contractor Company:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Email** \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

*\*Is there a current License/ID and liability insurance on file with the City of Cleveland?* \_\_\_ **Y** \_\_\_ **N**

**Description of Work** (please provide sign purpose, height, ground coverage and length of placement if applicable)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**X** \_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*All signs must be removed after event or when the permit expires.*

**Office Use Only:**

Permit Cost: \_\_\_\_\_ Plan Review Fee: \_\_\_ Y \_\_\_ N Permit # \_\_\_\_\_  
Payment Method: \_\_\_\_\_ Date of Payment: \_\_\_\_\_ City Employee: \_\_\_\_\_