



# Metropolitan Area Building and Construction Department (MABCD)

For Inspections call 316-660-1840

## Roofing/Siding Permit Application

Fee\$: \_\_\_\_\_

Date: \_\_\_\_\_

Permit #: \_\_\_\_\_

Address: \_\_\_\_\_ Contractor: \_\_\_\_\_

State Registration #: \_\_\_\_\_ License #: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Type of Improvement

Roofing  Siding  Both

### Number of Layers Removed

1 Layer  2 layers  Re-deck  Not Applicable

### Proposed Use (check one)

1-family  2-family  Multi-Family  Commercial  Detached Garage  Agriculture Building

Square Footage of Structure (total sq ft, including attached garage, porches, finished area of main floor) \_\_\_\_\_

Valuation of Siding \$ \_\_\_\_\_ Valuation of Roofing \$ \_\_\_\_\_

All provisions of laws, resolutions and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other Federal, State or Local Law, regulation, construction or the performance of construction.

Applicant Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

MABCD Form #62



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