



CITY OF TUMWATER
 555 ISRAEL RD. SW, TUMWATER, WA 98501
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 (360) 754-4180

**COMMERCIAL REROOFING PERMIT
 Submittal Checklist**

TUM -	DATE STAMP
RCVD BY	

APPLICANT INFORMATION *(please print neatly)*

NAME OF APPLICANT: _____ EMAIL: _____

SUBJECT PROPERTY INFORMATION

ADDRESS OF PROPERTY (COMPLETE): _____

In order to reroof a commercial building, you must submit a completed permit application and all items on this checklist unless modified or waived by Staff.

A. PERMIT APPLICATION	N/A	Provided	Staff
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1. Provide a complete and signed (by owner or authorized representative) application and applicable fee. Note: Payment of the plan check fee is required at the time of application.		<input type="checkbox"/>	<input type="checkbox"/>
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B. REROOFING INFORMATION	N/A	Provided	Staff
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1. On the application, under "Description of Work" please specify the following:			
a. Type of existing building roof construction.		<input type="checkbox"/>	<input type="checkbox"/>
b. The number of existing layers on the roof.		<input type="checkbox"/>	<input type="checkbox"/>
c. The type of exiting roof material and if it is to be removed.		<input type="checkbox"/>	<input type="checkbox"/>
d. The number of squares to be roofed.		<input type="checkbox"/>	<input type="checkbox"/>
e. The type of proposed roof materials.		<input type="checkbox"/>	<input type="checkbox"/>
f. The fire classification of the proposed roofing materials and provide the manufacturer's specifications.		<input type="checkbox"/>	<input type="checkbox"/>
g. If existing roof insulation is being removed, provide specifications and R values of new insulation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Fire watch for hot work or torch down.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. ELECTRONIC SUBMITTAL	N/A	Provided	Staff
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1. Compact disc (CD) or USB drive containing all of the plans, reports, etc. as outlined under A and B above, in PDF-file format. Maximum format shall be 300 dpi. Note: Please do not include the application or submittal checklist in electronic format.		<input type="checkbox"/>	<input type="checkbox"/>
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I verify that all required documents associated with this application have been submitted.

 Signature of Applicant

 Date