



**COMMERCIAL RE-ROOF/RE-SIDE  
PERMIT APPLICATION**

510-B Pioneer Street/PO Box 608  
Ridgefield, WA 98642  
Tel: (360)887-3908  
Fax: (360)887-2507  
[www.ridgefieldwa.us](http://www.ridgefieldwa.us)

|                 |
|-----------------|
| OFFICE USE ONLY |
| PERMIT NUMBER   |
| _____           |
| _____           |

**CONTACT INFORMATION**

PROPERTY OWNER:  Check box if primary contact

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

(Original signature or a letter of authorization from the owner required)

APPLICANT:  Check box if primary contact

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

(Original signature required)

CONTRACTOR:  Check box if primary contact

Contact Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor's License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

City of Ridgefield Business License #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

(Original signature required)

CERTIFIED EROSION CONTROL PERSON **IF APPLICABLE:** \_\_\_\_\_

PROPERTY INFORMATION (REQUIRED)

Site Address: \_\_\_\_\_

Name of Business: \_\_\_\_\_ Parcel #: \_\_\_\_\_

DESCRIPTION OF PROPOSED WORK:

**Check all that applies:**

Re-roof          Re-side

Is sheathing being replaced?          Yes          No

Value of Proposed Work \$ \_\_\_\_\_

SUBMITTAL CHECKLIST

**APPLICATION REQUIREMENTS: Provide two (2) paper copies.**

1. **STRUCTURAL CALCULATIONS, if applicable**

2. **Narrative**

FEES: Fees must be paid at the time of application. Please make checks payable to City of Ridgefield.

*By affixing my signature hereto, I certify under penalty of perjury that the information furnished herein is true and correct to the best of my knowledge and that I am the owner of the premises where the work is to be performed or am acting as the owner's authorized agent. I further agree to hold harmless the City as to any claim (including costs, expenses and attorney's fees incurred in investigation of such claim) which may be made by any person, including the undersigned, an filed against the City, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information provided to the City as a part of this application. The building official may, in writing, suspend or revoke a permit issued under the provisions of this code whenever a permit is issued in error or on the basis of incorrect information supplied, or in violation of any ordinance or regulation or any of the provisions of this code.*

Signature of Owner/Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

(Original signature required)