



**RESIDENTIAL 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

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)

PROPERTY INFORMATION (REQUIRED)

Site Address: _____

Subdivision, Phase, & Lot: _____ Parcel #: _____

APPLICATION FEE:

RE-ROOF: \$100.00

SIDING - FULL TEAROFF WITH OR WITHOUT SHEATHING REPLACED: \$100.00

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)