



PLANNING & BUILDING  
DEPARTMENT  
201 CENTER ST. W  
EATONVILLE WA 98328  
360-832-3361 EXT 114

**PERMIT  
NUMBER:** \_\_\_\_\_

**WORK TYPE:**

RESIDENTIAL \_\_\_\_\_

COMMERCIAL \_\_\_\_\_

## ROOF APPLICATION

**\*\* Please note: If sheathing is NOT being replaced, you do not need to apply \*\***

<b>SITE ADDRESS</b>		<b>PROJECT VALUATION</b>
PARCEL NUMBER		
<b>APPLICANT</b>	PHONE	EMAIL
ADDRESS (Street, City, State, Zip)		
<b>PROPERTY OWNER</b>	PHONE	EMAIL
ADDRESS (Street, City, State, Zip)		
<b>CONTRACTOR</b>	PHONE	EMAIL
ADDRESS (Street, City, State, Zip)		
CONTRACTOR LICENSE #		EXP DATE
<b>PROJECT DESCRIPTION</b>		

\_\_\_\_\_ TEAR OFF \_\_\_\_\_ OVERLAY (\_\_\_\_\_ OF EXISTING LAYERS)

An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after date of filing, unless such application has been pursued in good faith or a permit has been issued.

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit. All provisions of law and ordinances governing this type of work will be complied with whether specified herein or not.

Print Name: \_\_\_\_\_

Owner \_\_\_\_\_ Agent/Other \_\_\_\_\_

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

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

The Town of Eatonville is an Equal Opportunity Employer and Provider.