



CITY OF GREEN COVE SPRINGS
321 WALNUT STREET
GREEN COVE SPRINGS, FL 32043
(904) 529-2200 EXT: 315
(FAX) (904) 529-1049

APPLICATION FOR RE-ROOF
OR NEW ROOF

COMMERCIAL RE-ROOF/ SQUARE FOOTAGE _____ # OF SQUARES _____

COMMERCIAL NEW ROOF/ SQUARE FOOTAGE _____ # OF SQUARES _____

RESIDENTIAL RE-ROOF/ SQUARE FOOTAGE _____ # OF SQUARES _____

RESIDENTIAL NEW ROOF/ SQUARE FOOTAGE _____ # OF SQUARES _____

SHIP RE-ROOF / SQUARE FOOTAGE _____ # OF SQUARES _____

LOCATION ADDRESS: _____

TIME TO CONSTRUCT: _____ ZONING: _____ VALUATION: _____

OWNER NAME: _____

OWNER ADDRESS: _____ PHONE: _____

CONTRACTOR'S NAME: _____

CONTRACTOR'S ADDRESS: _____ PHONE: _____

PLANS ATTACHED: _____ SKETCH ATTACHED _____

PERMIT TOTAL: _____

IN CONSIDERATION OF THE APPROVAL OF THE ABOVE APPLICATION, I DO HEREBY CERTIFY THAT I WILL, WITH ALL RESPECTS, PERFORM ALL WORK IN ACCORDANCE WITH THE APPROVED PLAN OR SKETCH AND ABIDE BY ALL THE REGULATIONS CONTAINED IN THE CITY CODE.

PLEASE NOTE:

SIGNATURE OF CONTRACTOR: _____

APPLICATION APPROVED BY: _____ DATE: _____

SIGNATURE OF BUILDING OFFICIAL: _____

THIS IS NOT YOUR PERMIT!

PLEASE NOTE:

AFTER THE COUNTY SIGNS THIS APPLICATION, YOU MUST COME BACK TO THE CITY HALL BUILDING DEPARTMENT TO COMPLETE THE PROCESS AND RECEIVE YOUR PERMIT.

