



# Code Enforcement Department

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## RESIDENTIAL ROOF REPLACEMENT / REPAIR

<b>ANY STRUCTURAL ALTERATIONS OR ADDITIONS TO A ROOF REQUIRE A FULL RESIDENTIAL BUILDING PERMIT APPLICATION TO BE SUBMITTED.</b>		
<b>Required Information for a complete submission</b>		
♦ Fully completed and signed application. ♦ Workers' Compensation Insurance Coverage Affidavit. ♦ Contractor's Pennsylvania Home Improvement Contractor License.		
<b>Applicant Information</b>		
Name:		
Address:		
Daytime phone:	Cell phone:	Email:
Address of work location:		Lot & Block:
<b>Roof Information</b>		
Roof Type:	<input type="checkbox"/> Replacement	<input type="checkbox"/> Repair
Current roofing material:		
New roofing material:		
Square footage of project:	Total project cost:	
<b>Contractor</b>		
Name:	Phone:	
Contact:	E-Mail:	
Address:		
PA Home Improvement Contractor Registration Number:		
Note: A copy of the contractor's workers' compensation certificate must be filed with this office in order to receive a Permit. Additionally, a copy of the contractor's Pennsylvania Home Improvement Contractor License must be filed with this office in order to receive a Permit.		
<b>Additional Information</b>		
Applicant Signature:		Date:

**INCOMPLETE APPLICATIONS OR OBSOLETE FORMS WILL BE REJECTED**

<b>For Borough Use Only</b>		
Date Received:	Application Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date:
Comments:		
<b>Application Status</b>		
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Date: <input type="text"/> Permit No.: <input type="text"/>
Reason Denied:		
Issued by: <b>X</b>		
<b>Payment Information</b>		
Total: \$ <input type="text"/>	Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> Check/MO # <input type="text"/>	Receipt # <input type="text"/>