

# RESIDENTIAL ONLY RE-ROOF APPLICATION

Submit application to [digitalpermits@orlando.gov](mailto:digitalpermits@orlando.gov)

For efficient processing, please reference "New Permit" in the Subject Line \*Required Fields



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

\*Job Site Address or Parcel ID #: \_\_\_\_\_

\*Digital Applicant/Primary Contact: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Email: \_\_\_\_\_

PROPERTY

\*Job/Project Name: \_\_\_\_\_

\*Property Owner Name: \_\_\_\_\_

Property Owner Email: \_\_\_\_\_

\*Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

CONTRACTOR

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

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

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

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

Company Address: \_\_\_\_\_ Phone: \_\_\_\_\_

PROFESSIONALS

Architect/Engineer's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Bonding Company Name & Address: \_\_\_\_\_

Fee Simple Titleholder's Name & Address (if other than owner): \_\_\_\_\_

Mortgage Lender's Name & Address: \_\_\_\_\_

WORK  
DESC.

\*Include description of re-roof type:

\_\_\_\_\_  
\_\_\_\_\_

Related to Code Enforcement Action?    Yes    No    Estimated construction cost \$ \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in the City of Orlando. I understand that a separate permit must be secured for MECHANICAL, ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

# WARNING TO OWNER

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. IF THE ESTIMATED COST OF THIS JOB IS GREATER THAN \$5,000 A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT MUST BE FILED WITH PERMITTING SERVICES PRIOR TO SCHEDULING YOUR FIRST INSPECTION.

If you are not the owner of the property being permitted, you must, by law (FS 713.135 (c)) promise to inform the fee simple titleholder that the property in question is being subjected to possible liens and/or attachment.

Property Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Permit #: \_\_\_\_\_ (if applicable)

\*Property Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_ (Owner)

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of physical presence or online notarization this \_\_\_\_\_, day of \_\_\_\_\_, 202\_, by \_\_\_\_\_ as \_\_\_\_\_, a Florida \_\_\_\_\_, on behalf of the company, who is personally known to me or has produced \_\_\_\_\_ (type of identification) as identification.

Notary Public Signature

Print Name: \_\_\_\_\_ My Commission Expires: \_\_\_\_\_

PROPERTY OWNER

\*Contractor Signature \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_ (Contractor)

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of physical presence or online notarization this \_\_\_\_\_, day of \_\_\_\_\_, 202\_, by \_\_\_\_\_ as \_\_\_\_\_, a Florida \_\_\_\_\_, on behalf of the company, who is personally known to me or has produced \_\_\_\_\_ (type of identification) as identification.

Notary Public Signature

Print Name: \_\_\_\_\_ My Commission Expires: \_\_\_\_\_

CONTRACTOR

## CERTIFICATE OF COMPETENCY HOLDER

Contractor's State Certification or Registration No. \_\_\_\_\_

Contractor's Certificate of Competency No. \_\_\_\_\_

### OWNER'S ELECTRONIC SUBMISSION STATEMENT:

Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

For plan review status, inspection scheduling/results and other permitting information, visit online at [orlando.gov/permits](http://orlando.gov/permits), or please call "PROMPT", our Interactive Voice Response system at 407.246.4444.

ECONOMIC DEVELOPMENT • PERMITTING SERVICES  
400 South Orange Avenue • First Floor PO Box 4990 • Orlando, FL 32802-4990  
P 407.246.2271 • F 407.246.3420 • [Orlando.gov/permits](http://Orlando.gov/permits)

# Scope of Work Re-Roofing

Complete and submit with your application.

Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

Job Address: \_\_\_\_\_

Re-roof Type:      Replacement - remove existing and replace      Re-cover - new roof over existing  
*Note: If damaged decking replacement is required, an inspection is required.*

Special Notes: \_\_\_\_\_

Number of Stories:      Single-story      Two or more stories

Skylights:      Yes      No

**Type of Roof & Florida Product Approval numbers:**

|                               |             |                           |             |
|-------------------------------|-------------|---------------------------|-------------|
| Coating only                  | FL #: _____ | Smooth Surfaced Built-up  | FL #: _____ |
| Underlayment                  | FL #: _____ | Built-up with Aggregate   | FL #: _____ |
| Fiberglass Shingle            | FL #: _____ | Tile                      | FL #: _____ |
| Wood Shingle or Shake         | FL #: _____ | Metal - Direct Attachment | FL #: _____ |
| Modified Bitumen              | FL #: _____ | Metal with Purlins        | FL #: _____ |
| EDPM - Hypalon or PVC one ply | FL #: _____ | Other                     | _____       |

Slope of Roof:      Less than 2:12\*      2:12 - 4:12\*\*      4:12 or greater

*\*No shingle application allowed*

*\*\*Multi-layered underlayment required*

Ventilation:      Turbines qty \_\_\_\_\_      Off-ridge vent qty \_\_\_\_\_      Powered vent qty \_\_\_\_\_  
 Ridge vent length \_\_\_\_\_      Other/Unvented: \_\_\_\_\_

Flashing:      Use existing      Repair existing flashing      Replace all flashing  
 Replace w/L-flashing      Replace with step flashing

Drip Edge:      Use existing      Repair existing drip edge      Replace all drip edge

Valley Treatment:      Use existing valley      New metal      New mineral surface

**Note: The following information is required on site for final inspection:**

1. This scope of work form with the signed and notarized roofing affidavit.
2. Florida product approval installation instructions or site-specific engineering for all products used on the job. Please ensure exact manufacture products match application in field.
3. All submitted permit documentation on site and visible from the street.

**Note: Two inspections required for this permit:**      *Exterior dry in in-progress, Inspection Code 125*      *Final Inspection Code 600*