

Date \_\_\_\_\_

Permit # \_\_\_\_\_

**Application for Reroof permit**  
Forks Township  
Northampton County, Pennsylvania

Please complete highlighted areas only. See reverse side specifications & instructions.

Property Owner's Name \_\_\_\_\_

Address \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

General Contractor's Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Certificate of insurance \_\_\_\_\_

Address \_\_\_\_\_

Home owners Insurance: \_\_\_\_\_ Policy # \_\_\_\_\_

Assigned Address \_\_\_\_\_

Tax Map Nos \_\_\_\_\_

Zoning Classification \_\_\_\_\_

Estimated cost or Value of construction (exclude cost of land) \$ \_\_\_\_\_

Permit Fee: Zoning \$ \_\_\_\_\_ Building \$ \_\_\_\_\_

Estimated start Date \_\_\_\_\_ Estimated Finish Date \_\_\_\_\_

**Signature of property owner or Agent**

\_\_\_\_\_

Date \_\_\_\_\_

Telephone # \_\_\_\_\_

Cell # \_\_\_\_\_

## Reroof specification & instructions

1. Roof slope \_\_\_\_ Asphalt shingles are not permitted for slopes under 2/12. Double underlayment is required under 4/12.
2. Does existing roof have 2 or more layers of roof covering? \_\_\_Yes \_\_\_No If yes, tear-off is required
3. Is existing roof water-soaked or deteriorated? \_\_\_\_ Yes \_\_\_No If yes, tear-off is required.
4. What type of roof is in place now? \_\_\_Asphalt \_\_\_Slate Other
5. What type of roof is proposed?\_\_\_Asphalt \_\_\_Slate Other
6. Are eave vents or soffit vents being used \_\_\_Yes \_\_\_No  
Ridge vent to be installed? \_\_\_Yes \_\_\_No
7. Ice barrier required from the lowest edge of the roof to a point at least 24" inside the exterior wall.
  - All roof coverings shall be installed in accordance with the manufacturer's installation instructions.
  - A min of #15 felt shall be used. #30 felt may be required per manufacturer's instruction.
  - All deteriorated sheathing shall be replaced with like kind.
  - Base, cap, valley and side wall flashing shall be installed per IRC 905.2.8 and the manufactures instructions
  - Refer to Section 905 of the IRC for residential requirements.

**Only a final inspection is necessary after work is complete.**