FORM NO. BI 48 REV. 8/19

Application for Roofing and Siding

CITY OF VIRGINIA BEACH · PERMITS AND INSPECTIONS
2875 Sabre Street, Suite 500 · Virginia Beach, VA 23452 · (757) 385-8060
FAX (757) 385-5777 · www.vbgov.com/buildingpermits

Date _____

A permit is hereby requested for the following construction at:

Street address: _____ Lot#/Suite#: _____

GPIN: _____

Owner/Occupant Name: _____ Owner Phone#: _____

E-mail Address: _____ Cell Phone#: _____

Mechanic's Lien Agent Name: _____ ☐ None Designated

Address: _____ Phone#: _____

E-mail Address: _____ Cell Phone#: _____

Contractor:

Company Name: _____ State Registration # (Class A, B, or C) _____

*Address: _____ *Phone#: _____ *Fax#: _____

E-mail Address: _____ Cell Phone#: _____

**Provide this information when registering company for the first time or if change of address, phone, fax or email.*

Cost of Construction/Alteration: $_____ ☐ Residential ☐ Commercial

Check Scope of Work: ☐ Roofing ☐ Siding ☐ Roofing & Siding EIFS: Y / N *(Circle)*

For Roofing: ☐ Roof to be a nail-over with only one layer of roofing existing

☐ Existing Roofing to be removed and replaced with new materials

☐ Fire retardant treated plywood addressed in attached residences.

******NOTE: Please see back of form for additional requirements for Roofing and EIFS Projects******

Additional Information:

_____

_____

_____

Applicant's Name (Please Print): _____ Applicant's Signature: _____

I understand this permit is granted only for the work shown and described in this application.
Any falsification, misrepresentation, or misleading information given **VOIDS** this permit.