



City of Hughson
Building Safety Division
 7012 Pine Street
 Hughson, CA 95326
 (209) 883-0811

OFFICIAL USE ONLY
PERMIT #B00-00____-_____

Building Permit Application – Re-Roof

Project Valuation: \$ _____

Applicant type

Licensed Contractor

Owner-Builder (Complete Owner-Builder Form)

SECTION 1

Property Address: _____ A.P.N.: _____

SECTION 2

Property Owner _____ Mailing Address _____

City _____ State _____ Zip Code _____ Phone _____

SECTION 3

Contractor _____ Address _____

City _____ State _____ Zip Code _____ Phone _____

City Business License Number _____ State Contractor License Number _____

SECTION 4

ROOF INFORMATION

Type of Roof to Be Installed: _____
(If Special Type Roofing is Used, Provide ICC/ICBO Number)

Old Roof Type: _____ Existing Layers: _____

Will The Existing Layers Be Removed? Yes No

Existing Sheathing Material: _____

Proposed Sheathing Material: _____

Existing Roof Slope >>>>>>>>> Rise in Run = _____" Rise, _____" Run

Existing Roof Framing >>>>>>>>> Trusses: Yes No Spacing: _____" O.C.

Rafter Size: 2" X _____" Longest Span = _____ Feet _____ Inches

*****The applicant must sign this application*****

Signature _____ Print Name _____ Date _____