



APPLICATION FOR RESIDENTIAL ROOFING/SIDING PERMIT

**Town of Cape Charles
Municipal Building
2 Plum Street
Cape Charles, VA 23310
(757) 331-2176 Fax: (757) 331-4820
codeofficial@capecharles.org**

I, _____, representing _____, verify the property at _____ displays no evidence of rotting wood visible from the attic area (for roofs), exterior of the building (for siding), and exhibits no visual defects. If defective materials are found, they will be corrected and inspected prior to covering. Fire retardant treated plywood shall not be utilized or replaced in assemblies with a fire resistive rated construction within four (4) feet on either side of the firewall. All work shall be done in accordance with all applicable codes and ordinances.

Answer YES or NO beside the following statements as they pertain to this job:

- | | | |
|-----|----|--|
| Yes | No | 1. Roof to be a nail over with only one layer or roofing existing. |
| Yes | No | 2. Existing roofing to be removed and replaced with a new roof. |

TOWNHOUSES/CONDOMINIUMS/APARTMENTS

- | | | |
|-----|----|--|
| Yes | No | 3. Fire retardant treated plywood addressed. |
|-----|----|--|

Owner/Contractor Signature

ASBESTOS CERTIFICATION

I, _____, certify that the property at _____ has been inspected for asbestos and complies with the Code of Virginia, Section 54.1-503, the Uniform statewide Building Code, Section 108.10, the "Clean Air Act" (NESHAP) and OSHA "Standards for Construction Workers", Environmental Protection Agency (EPA), Asbestos Hazard Emergency Response Act, or is exempt as noted in the exemptions below:

- | | |
|------------------|---|
| <u>Exception</u> | 1. Single Family dwellings |
| | 2. Residential housing with four or less unit |

Owner/Contractor Signature