



Village of Lincolnwood

Roof Permit Application

JOB ADDRESS: _____ **CONSTRUCTION COST:** _____

PROPERTY OWNER INFORMATION

Name: _____
Address: _____
Home Phone Number: _____ Mobile Phone Number: _____
Email Address: _____

INSTALLER/CONTRACTOR INFORMATION

Name: _____
Address: _____
Office Phone Number: _____ Mobile Phone Number: _____
Email Address: _____

PROPOSED ROOF WORK

Check all that apply: Tear Off Re-Roof New Gutters/Downspouts
Check one: Single Family Residential Condo/Townhouse Commercial

INSTALLATION AND JOB REQUIREMENTS

- No more than two layers of roofing permitted.
- Natural ventilation must be provided: 1 square foot per 150 square feet of attic space. When soffit or eave vents are installed, the ratio may be reduced to 1 square foot per 300 square feet of attic space.
- Installation must meet ASTM D 3462 standard.
- Ice and water shield is required and must extend from the eave's edge to a point at least 24 inches inside the interior wall line of the building.
- Masonry flashings are required to be made of metal and "let into" brick 5/8 inches.
- Sidewall flashings are required to terminate beyond the siding or "kick out" so that water does not drain behind the siding.
- Gutters and downspouts must divert water to the front or rear yards.
- Dumpsters must be located on the subject property and not in any right of way. No additional permit is necessary for the dumpster.

ALL APPLICATIONS MUST HAVE A SIGNED CONTRACT ATTACHED FOR REVIEW

I hereby make an application for a roof permit and have read and understand the above installation and job requirements, and I hereby attest that installation will comply with these standards.

Print Name (Owner/Agent)

Signature

Date

Call 847.673.7402 at least 24 hours in advance to schedule final inspections

Approved By: _____ Fee Paid: _____ Issue Date: _____ Permit No.: _____