

**RESIDENTIAL-ONE AND TWO FAMILY DWELLINGS**

**FACSIMILE TRANSMITTAL SHEET**

Date: \_\_\_\_\_ From: \_\_\_\_\_  
To: \_\_\_\_\_ Your Phone Number: \_\_\_\_\_  
To Fax Number: (559) 498-4357 Your Fax Number: \_\_\_\_\_  
Number of Pages Transmitted \_\_\_\_\_ including this page

**PERMIT #:** \_\_\_\_\_

**RE-ROOF PERMIT APPLICATION**

**Project Address:** \_\_\_\_\_

**Owner:** \_\_\_\_\_

**Contractor Information:** \_\_\_\_\_  
Company Name Address Phone Number

**Building Use:**  Single Family  Duplex

**Valuation-Total Cost of Roofing Material and Labor:** \_\_\_\_\_

**Proposed Roofing Material:**

Wood Shake/Shingles  Asphalt Shingle/Composition  Single Ply  Metal  
 Built-Up/Torch Down/Rolled  Heavy/Light Weight Tile  Foam/Liquid Coating  Other \_\_\_\_\_

**Roofing Material Information & Approvals:**

Manufacturer's Name \_\_\_\_\_ ICC Evaluation Report No. \_\_\_\_\_

Cool Roof Rating Council (CRRC) Ratings: Solar Reflectance: \_\_\_\_\_ Thermal Emittance/SRI: \_\_\_\_\_

CRRC Product ID No. \_\_\_\_\_ Cool Roof Exceptions:  Roof Deck Insulation  Sealed Ducts (Tested)  
 Attic Ventilation  R-30 Attic Insulation  
 Radiant Barrier  No Ducts in Attic

Installed Weight of Tile: \_\_\_\_\_ Roof Slope: \_\_\_\_\_ Roofing Area: \_\_\_\_\_

Tear Off  Overlay (Only one existing may remain)

**COMMENTS:** \_\_\_\_\_  
\_\_\_\_\_

**COOL ROOF PRODUCTS SHALL MEET SHALL MEET THE REQUIREMENTS AS NOTED BELOW:**

**CALIFORNIA ENERGY CODE**

**SECTION 152 ROOF REPLACEMENTS - LOW-RISE RESIDENTIAL ONE AND TWO FAMILY DWELLINGS**

STRUCTURE	LOW-SLOPE < 2/12	STEEP SLOPE	ROOFING DENSITY < 5 PSF	ROOFING DENSITY > 5 PSF	SOLAR REFLECTANCE (MINIMUM)	THERMAL EMITTANCE (MINIMUM)	SRI	NOTES	EXCEPTIONS
LOW-RISE RESIDENTIAL	X				0.55	0.75	64		h
LOW-RISE RESIDENTIAL		X	X		0.20	0.75	16	1	a-b-c-d-e-f-g
LOW-RISE RESIDENTIAL		X		X	0.15	0.75	10	1	a-b-c-d-e-f-g

**EXCEPTIONS:**

**CIRCLE WHICH EXCEPTION TO THE COOL ROOF REQUIREMENTS YOU ARE REQUESTING**

- a. Insulation with a thermal resistance of at least 0.85 hr·ft<sup>2</sup>·F/Btu or at least a ¾ inch airspace is added to the roof deck over an attic; **Or**
- b. Existing ducts in the attic are insulated and sealed according to Section 151(f)10, HERS rating required with Cf4R Form **Or**
- c. Attic ventilation equal to 1/150 of the attic floor area and 30% within 2' vertical of the ridge. **Or**
- d. R-30 attic insulation. **Or**
- e. Building has a radiant barrier in the attic meeting the requirements of Section 151(f) 2. **Or**
- f. Building has no ducts in the attic. **Or**
- g. R-3 insulation installed on the deck above vented attic.

**NOTES:**

- 1. The attic ventilation is required to meet current California Building Code requirements when roofing with composition shingles due to manufacturer's warranty requirements. Low vents must be distributed equally around the structure.

**TYPICAL VALUES FOR ATTIC VENTS**

Soffit Vents

3.5 x 14.5 = 30 sq ins  
 3.5 x 22.5 = 50 sq ins  
 5.5 x 22.5 = 80 sq ins

Small Dormer Vents

50 sq ins

Large Dormer Vents

100 sq ins

Ridge Vents

Per ICC Evaluation Report



Development and Resource Management Department
Building and Safety Services Division

Project Address \_\_\_\_\_

Permit No. \_\_\_\_\_

APPLICATION TYPE: BLDG \_\_\_\_\_ ELEC \_\_\_\_\_ PLBG \_\_\_\_\_ MECH \_\_\_\_\_ GRAD \_\_\_\_\_ OTHER \_\_\_\_\_

DRAW DOWN \_\_\_\_\_ ACCT NO. \_\_\_\_\_ CREDIT CARD \_\_\_\_\_ ACCT NAME \_\_\_\_\_

SPECIAL CONDITIONS

WORKERS COMPENSATION

Section 3800 of the State Labor Code provides that every county or city which requires issuance of a permit as a condition precedent to the construction, alteration, improvement, demolition, or repair of any building or structure shall require that each applicant for permit have on file:

(Please Initial)

- \_\_\_\_\_ A Certificate of Consent to self-insure by the Director of Industrial Relations or
\_\_\_\_\_ A Certificate of Workers' Compensation Insurance issued to the city to be an admitted insurer.
\_\_\_\_\_ A signed statement of a Firm Without Employees on file with the city.

EXCLUSIONS

(Please Initial)

- \_\_\_\_\_ Permits for work costing \$100.00 or less.
\_\_\_\_\_ Applicants for permits who sign the following certifications:
"I certify that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California."

If after signing this certificate, the applicant desires to employ any person for work covered by this permit, the applicant must obtain Workers' Compensation Insurance as required by Section 3700 of the State Labor Code, or this permit shall be deemed revoked.

STATE REQUIRED LICENSING

I hereby affirm under penalty of perjury that I am licensed under provisions or Chapter 9 of Division 3 of the Business and Professions Code, and my license is in full force and effect. LICENSE NO. \_\_\_\_\_

EXEMPTION FROM STATE REQUIRED LICENSING

(Please Initial)

- \_\_\_\_\_ I am the owner of the property addressed on the subject permit application. The building or improving of structures hereon, or appurtenances thereto, will be done by myself or through my own employees with wages as their sole compensation. The structure or structures, with or without the appurtenances thereto, is not intended to be and will not be offered for sale within one year after completion of same (Section 7044).
\_\_\_\_\_ As owner of the property the building or improving structures or appurtenances thereto will be contracted with licensed contractors. (Section 7044)
\_\_\_\_\_ Aggregate total of the contracts is not more than \$500.00 for labor, materials, and all other work. (Section 7048)
\_\_\_\_\_ I am a licensed architect, engineer, or structural pest control operator within the scope of my license. (Section 7051)

Print Firm Name: \_\_\_\_\_

HAZARDOUS WASTE AND SUBSTANCE SITES

I declare that I have made application for a permit to develop property at Fresno California. I have consulted the list of Hazardous Waste and Substance Sites developed by the State Office of Planning and Research pursuant to GC Section 65962.5.

(Please Initial)

- \_\_\_\_\_ I have determined that the said property is not included on a list compiled pursuant to this section.
\_\_\_\_\_ I have determined that the said property is included on a list compiled pursuant to this section.

I further declare under penalty of perjury under the laws of the State of California, that the foregoing is true and correct.

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_

SIGNATURE \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

PRINT NAME \_\_\_\_\_ Staff Initials \_\_\_\_\_