



RE-ROOFING INFORMATION SHEET

CITY OF SOLANA BEACH

635 S. HIGHWAY 101, SOLANA BEACH, CA 92075 | (858) 720-4450

www.cityofsolanabeach.org

The following information shall be provided for city review and approval prior to issuing a building permit for re-roofing. In addition to this application, please attach a copy of the listing for the Class "A" Roof Assembly.

- 1. Street Address _____
- 2. Building Occupancy _____
- 3. Roof slope: Rise _____ inches in 12 inches. Roof Area _____
- 4. New Roof Type (COMP / CLAY / CONCRETE / BUILT-UP / OTHER) _____
- 5. New Roof Trade Name and Manufacturer _____
 - a. Cool Roof Rating Council PROD ID #: _____
- 6. New Roof weight per square _____
- 7. Description of new roof application _____
- 8. Class "A" Roof Assembly approval: ICC# _____ U.L. # _____
- 9. Type of existing roof _____
- 10. Will the existing roof be removed? YES NO
- 11. Is there more than one existing roof? YES NO
- 12. Is the existing structural design sufficient to sustain the weight of the proposed new roof? YES NO
- 13. Roof nailing inspection is required for new or replacement sheathing.
- 14. In moderate, high and very high fire hazard areas, new roof and eave vents shall be non-combustible, corrosion resistant with openings between 1/16" minimum and 1/8" maximum.
- 15. The pre-roofing inspection may be accomplished by a special inspector in lieu of the City inspector. The Building Official has determined that a State licensed general contractor, or roofing contractor is qualified to act as the special inspector.

- I certify that all information on this form is true and correct.
- I agree to perform all work in accordance with the manufacturers approved Class "A" ICC or UL listing, including roof deck, underlayment, interlayment, insulation and roof covering to the listing.
- I am a licensed general contractor or roofing contractor and will act as the pre-roofing special inspector. I will certify in writing prior to final City approval that the pre-roofing inspection was made and that the substrate and/or existing roof is adequate prior to application of the new roof.

Contractor Company Name: _____

CA State License Number: _____

Signature: _____

PRINT NAME: _____