



Roofing Application
Cedar Rapids Building Services Department
500 15th Ave SW, Cedar Rapids, IA 52404
Phone: (319) 286-5831
Fax: (319) 286-5830

RESIDENTIAL PROJECTS:

Type of structure (check only one box):

☐ Dwelling ☐ Dwelling with Attached Garage ☐ Detached Garage ☐ Shed

*****A separate permit application is required for each structure on the property**

Material:

No. of Squares:

Number of existing
layers on roof:

Layover: ☐ Yes ☐ No

Tear off existing: ☐ Yes ☐ No

Replace Sheathing: ☐ Yes ☐ No

COMMERCIAL PROJECTS:

Type of structure (check only one box):

☐ Multi-Unit Complex (# of units____) ☐ Commercial

*****A separate permit application is required for each structure on the property**

Material:

Valuation of Project:

Number of existing
layers on roof:

Layover: ☐ Yes ☐ No

Tear off existing: ☐ Yes ☐ No

Replace Sheathing: ☐ Yes ☐ No

Contractor:

Contractor Email:

Contractor Phone:

Owner of Property:

Owner Email:

Owner Phone:

Project Address:

Applicant's Signature: _____ Date: _____

SITE PLAN NOT REQUIRED

WORK STARTED BEFORE PERMIT IS ISSUED & POSTED IS SUBJECT TO PENALTY

Instructions and Information

Reference: Adopted Chapter 33 of the Municipal Ordinance.

This permit does not authorize installation of a new roof covering over more than two existing roof coverings or over unsound or rotted sheathing.

Email permit to: residential@cedar-rapids.org

PERMIT TECH: DKB MB RM

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