VILLAGE of ORLAND HILLS

PRINT or TYPE

16033 South 94th Avenue Orland Hills, Illinois 60487-4623

PRINT or TYPE

Please check which construction projects will be included in this permit.

(Rev. May-2010)

□ REROOFING PERMIT APPLICATION

			Phone:			
Applicant:						
					Zip:	
NOTE Roofing	g contractors m	nust be licensed by			eir insurance company.	
FOR □ WIN	DOWS	PLEASE AN	SWER THE FOLI			
(1.) What year wa	s this house bu	uilt?		before 1978, includ omeowner's Pre Re	le a copy of the signed	
(2.) Are any new ope	enings being inst	alled? [Y	Yes] [No]	omeowner's Fie Re	novation Form	
(3.) Are any existing	g openings being	enlarged? [Y	es] [No]			
<i>FOR</i> □Siding □	Gutters □Soff	iit □Fascia <u><i>PLI</i></u>	EASE INCLUDE A	COPY OF THE S	IGNED CONTRACT.	
FOR RERO	OFING	PLEASE COMP	PLETE THE FOLL	OWING:		
FOR RERO (1.) Number of lay (2.) Existing roof s.	OFING vers of roof shing hingles to be rea	PLEASE COMP gles on existing roomoved: (circle of	of: (Max. ine) [Yes] [No	<i>.OWING:</i> 1 layer or must tearc o]		
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Phone: 708/349-4887 PLEASE REQUEST FINAL INSPECTION Fax: 708/349-1358 WHEN COMPLETE