

City of Fairlawn Zoning, Housing & Residential Building Department

Roofing/Siding Application

Project Address _____

Property Owner _____ Phone _____

Property Owner Address (if different than above) _____

Contractor _____ Phone _____

Contractor Address _____

Roofing

Total sq. ft. to be replaced _____

What type of shingle is to be installed? _____

What type of venting is to be installed? _____

Removing or leaving old shingles? _____

If shingles are not being removed, how many layers of shingles will be on the roof when work is completed?

Estimated cost _____

Fee: \$70.00

Siding

Total square feet to be replaced _____

What type of siding is to be installed? _____

Estimated cost _____

Fee: \$70.00

The undersigned (if not property owner) hereby states that authority has been granted by the owner to apply for this license. This application is submitted for a license to erect or alter a structure as described in this application, and the accompanying drawings, which are a part of this application. The acceptance of this license herein applied for shall constitute an agreement on the part of the undersigned to abide by all the conditions herein contained. The undersigned shall comply with all rules and regulations of the City of Fairlawn, the adopted construction codes, and the laws of the State of Ohio, and this agreement, as a condition of said license. Further, all work shall be conducted in a workmanlike manner.

Non-Compliance: Projects begun prior to a zoning certificate or building permit being issued for a single-family residential dwelling shall cost 150% of the applicable fee and for any structure other than a single-family residential dwelling, shall cost 300% of the applicable fee. Work required by emergency repairs shall be exempt from this fee provided the permit is applied for within seventy-two hours of initiating the emergency repairs.

Please allow 7 – 10 days for processing of this application.

Applicant Signature _____

Date _____

Print Applicant Name _____

Phone _____

Email Address _____

Fax: _____

(If you prefer to be contacted by email)

**3487 S. Smith Rd. · Fairlawn, OH 44333 · 330-668-9502 / (Fax) 330-668-9546
Email: bldg_zoning@fairlawn.us**