



Phone (507)238-9461

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## BUILDING PERMIT – RESIDENTIAL ROOFING

APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

PHONE # \_\_\_\_\_

ADDRESS OF ROOFING PROJECT: \_\_\_\_\_

REMOVE & REPLACE \_\_\_\_\_ APPLY OVER EXISTING \_\_\_\_\_ (ONLY 2 LAYERS ALLOWED)

TYPE OF SHINGLES: \_\_\_\_\_ (ASPHALT, METAL, ETC)  
WOOD FIRRING STRIPS REQUIRED WHEN INSTALLING METAL ROOF PANELS OVER 1 LAYER OF ASPHALT SHINGLES

STRUCTURE BEING DONE \_\_\_\_\_ (HOUSE/GARAGE)

CONTRACTOR: (INCLUDE LICENSE#) \_\_\_\_\_  
IF HOMEOWNER IS DOING THEIR OWN WORK, CONTRACTOR WAIVER FORM SIGNED AND ATTACHED.

PERMIT FEE: \_\_\_\_\_ PAID: \_\_\_\_\_

CASH / CHECK / CREDIT CARD

THE APPLICANT, BY SIGNATURE HEREWITH, AGREES TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAW REGULATING BUILDING CONSTRUCTION, UNDER THIS PERMIT.

APPLICANT SIGNATURE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

C I T Y O F L A K E S