

Planning & Development Department  
**ROOFING PERMIT APPLICATION**

**1. PROJECT INFORMATION:**

DATE OF SUBMITTAL: \_\_\_\_\_

PROJECT ADDRESS (If existing): \_\_\_\_\_

HCAD PARCEL NO(s) 13-digit Tax ID(s): \_\_\_\_\_

DESCRIBE WORK: \_\_\_\_\_

BUILDING USE: \_\_\_\_\_ **PERMIT FEE \$10.00**

**2. PROPERTY OWNER CONTACT INFORMATION:**

OWNER'S NAME: \_\_\_\_\_ PHONE : \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

**3. CONTRACTOR:**



AGENT / CONTRACTOR COMPANY: \_\_\_\_\_

PHONE 1: \_\_\_\_\_ PHONE 2: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ FAX #: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT PERSON'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**4. APPLICATION CHECKLIST & SUPPORTING DOCUMENTATION (Check applicable boxes):**

- COMPLETE ITEMS 1 THRU 4 OF PERMIT APPLICATION
- REVIEW & SIGN ROOFING POLICY (Page 2 of Application)
- SUBMIT COMPLETED APPLICATION & SIGNED ROOF POLICY
- UPON PROJECT COMPLETION, SUBMIT COMPLETED "CERTIFICATE FOR ROOFING ACTIVITY" WITHIN 30 DAYS OF PERMIT ISSUANCE

NOTES TO APPLICANT:

1. CONTRACTOR MUST BE REGISTERED WITH THE CITY
2. TO REGISTER WITH CITY, SUBMIT CURRENT CERTIFICATE OF INSURANCE WITH CITY NAME & ADDRESS AS CERTIFICATE HOLDER
3. **NOT A VALID PERMIT UNTIL OWNER/CONTRACTOR IS NOTIFIED OF APPROVAL AND ALL APPLICABLE FEES ARE PAID IN FULL**
4. **IF HOMEOWNER DOES NOT UTILIZE CONTRACTOR TO DO INSTALLATION, THEN GENERAL LIABILITY INSURANCE IS NOT REQUIRED.**

**APPLICANT PRINTED NAME:** \_\_\_\_\_ **APPLICANT SIGNATURE:** \_\_\_\_\_

**(FOR STAFF USE ONLY):**

Occupancy Type: \_\_\_\_\_ Flood Zone: \_\_\_\_\_ Class Work: \_\_\_\_\_ Taxes: \_\_\_\_\_ CE: \_\_\_\_\_

Construction Type: \_\_\_\_\_ Use Zone: \_\_\_\_\_ No. Stories: \_\_\_\_\_ Sq. Ft.: \_\_\_\_\_

**SPECIAL CONDITIONS:**

1. Permit conditions as per City Policy #P2009-001
2. Owner/ Contractor shall be responsible for obtaining pre- shingle inspection (by 3rd party or city inspector)
3. To avoid code enforcement action, Owner/ Contractor shall provide final approval certification letter within 30 days of permit issuance.
4. For properties east of Hwy 146, contact the Texas Department of Insurance (TDI) for separate, voluntary requirements/ inspections that could affect insurance coverage on your new roof.

Add Roof Code Enforcement Language

Approved for Permit Issuance By: \_\_\_\_\_ Date: \_\_\_\_\_

**PERMIT NO.:** \_\_\_\_\_

# ROOFING POLICY

ORIGINAL ROOF POLICY EFFECTIVE 11-01-09

## POLICY TO CLARIFY ASPHALT ROOF SHINGLES INSTALLATION/INSPECTIONS #P2009-001

(Effective 06/16/2010; Amended 08/25/2015)

Purpose: To ensure proper installation of asphalt roof shingles for basic wind speed of 120 mph or 150mph for both residential and non-residential structures.

Timing: Permanent policy for use by the public and staff.

Policy: All asphalt roof shingles shall be a minimum of Class F shingles for uplift and installed with nails (regardless of whether the manufacturer allows the use of staples). Nailing shall be in accordance with the manufacturer's printed installation instructions.

Owner and/or contractor shall be responsible for ensuring the use of Class F shingles. The shingle wrapper shall be retained to confirm compliance of applicable material.

**Within 30-days of permit issuance, a final approval on the installed roof is required. The Owner and/or Contractor shall be responsible for providing the city with certification. A windstorm WPI-8 certification by the Texas Department of Insurance (for eligible properties) –or- (the provided form certification letter) certified by either a Texas licensed engineer (original seal/signature required) or an ICC Certified Costal Construction and Floodplain Inspector (certificate#/signature required) may be used.**

**Letter shall certify: 1) Class F shingles were used; 2) shingles were properly installed with nails (not staples); and 3) the proper number of nails were used. –or- Properties E of Hwy 146 (who are eligible for the Voluntary TDI Windstorm Program) may choose to provide the City of La Porte with a copy of the WPI-8 certification showing the roof complies with TDI Inland I (120 mph or 150mph, min Class F Shingles) requirements.**

*(Properties W of Hwy 146 are not eligible and need to choose one of the alternate options)*

**NOTE:** For properties east of Highway 146, compliance with the additional Texas Department of Insurance (TDI) windstorm requirements is **voluntary**. However, many insurance companies require state approval before they will insure roofs, so we recommend you talk with your insurance agent on their requirements. Also, for **requirements/inspections by TDI, you may contact them at #281-474-5025.**

\_\_\_\_\_  
OWNER SIGNATURE

\_\_\_\_\_  
DATE

-OR -

\_\_\_\_\_  
CONTRACTOR SIGNATURE

\_\_\_\_\_  
DATE

**City of La Porte**  
**Certification Letter for Roofing Activity**

As noted in "Special Conditions" of roofing permit, a final approval on the installed roof is required ***within 30-days of permit issuance***. The owner and/or contractor shall be responsible for providing the City with this completed certification form letter of if eligible, the WPI-8 Certification from the Texas Department of Insurance. This form shall be completed by a Texas licensed engineer (original seal/signature required) or an ICC Certified Coastal Construction & Floodplain Inspector (certificate #/signature required).

**THIS COMPLETED FORM LETTER CERTIFIES THE FOLLOWING:**

- [ X ] A minimum of class F shingles were used.
- [ X ] Shingles were properly installed with nails (not staples).
- [ X ] The proper number of nails were utilized to achieve 120mph or 150mph (minimum) rating.

\_\_\_\_\_

**Owner's Name****Physical Address of the Roofing Job**

**Approved by:**

Texas Department of Insurance (TDI) Date WPI-8 Received: \_\_\_\_\_

For properties East of Hwy 146 (who are eligible for the Voluntary TDI Windstorm Program) provide the City of La Porte with a copy of the **WPI-8 Certification** showing the roof complies with TDI Inland I (120 mph or 150 mph min Class F) requirements.

*(Properties West of New Hwy 146 are not eligible for this program and need to choose an option below)*

**--- (OR) ---**

Texas Licensed Engineer

Name _____	Date _____	Signature _____
Address _____		
Phone # _____		
State License Number _____		

PLACE/SIGN & ORIG. SEAL HERE  
(MUST PROVIDE TO CITY)

**---- (OR) ---**

ICC Certified Coastal Construction & Floodplain Inspector

Name _____	Certificate # _____
Address _____	
Date _____	
Phone # _____	
Signature _____	