



CITY OF HAYSVILLE
Public Works Department
 401 S. Jane
 PO Box 404
 Haysville, KS 67060
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www.haysville-ks.com

Roofing and Siding Permit Application

PROJECT INFORMATION

Project Address:		<input type="checkbox"/> Residential <input type="checkbox"/> Commercial
Contractor Name (or responsible party doing work):		Contractor License #:
Contractor Address:	Contractor Phone #:	KS Roofing Registration Certificate #:
Property Owner:	Property Owners Address (if different from project address):	

DESCRIPTION OF WORK

Type of Improvement: <input type="checkbox"/> Roofing <input type="checkbox"/> Siding <input type="checkbox"/> Both	
Roofing Material: <input type="checkbox"/> Shake <input type="checkbox"/> Comp <input type="checkbox"/> Asphalt <input type="checkbox"/> Built-up <input type="checkbox"/> Other _____	
Number of Existing Layers: _____	
Siding Material: <input type="checkbox"/> Vinyl <input type="checkbox"/> Metal <input type="checkbox"/> Other _____	
Total Valuation of Roofing:	Total Valuation of Siding:

I/We understand that all provisions of laws, resolutions and ordinances governing this type of work will be complied with whether specified herein or not.

I/We acknowledge that the \$25.00 application fee is non-refundable.

SIGNATURE: _____ Owner Agent or Contractor

OFFICE USE ONLY		
Date/Time Application Received: _____	Fee: _____	Receipt #: _____