



Kennett Square Borough
120 Marshall Street
Kennett Square, PA 19348
Phone: (610) 444-6020 Fax: (610) 444-3216

ROOFING PERMIT APPLICATION FOR NEW ALTERATIONS OR REPAIRS

NOTWITHSTANDING THE ISSUANCE OF THE PERMIT,
ALL PROVISIONS OF THE BUILDING AND ZONING CODES
WILL BE COMPLIED WITH, WHETHER SPECIFIED HEREIN OR NOT

I (we) hereby apply for a permit to perform roofing work (give exact location of work to be performed):

Address: _____

Give explicit details as to work proposed and materials used:

Type of Building: Residential Commercial Industrial Other

Estimated cost of job: \$ _____ Square footage of job: _____

Start date: _____

Owner: _____

Address: _____

Contractor: _____ Registration No: _____

Phone: () - _____

Address: _____

Applicant Signature: _____

*Property Owner Signature: _____

*required _____ **FOR BOROUGH USE ONLY** _____

Zoning District: _____ Parcel # _____ Permit # _____ Permit Fee \$ _____

Approval date: ___/___/___

Building Inspector Signature

WORKMEN'S COMPENSATION AFFIDAVIT

I, _____, do solemnly swear that I will not employ/hire any other persons for the project for which I am seeking a _____ permit.

After receipt of the _____ permit, if I employ any other persons I must notify the Borough of Codes Department and provide proof of Workmen's Compensation coverage within three (3) working days.

I understand that failure to comply will result in a Stop-Work Order and that such order may not be lifted until proper coverage is obtained, as provided by Section 302(e) (4) of the Act of June 2, 1915 (P.L. 736), known as The Pennsylvania Workmen's Compensation Act, reenacted and amended June 21, 1939, amended December 5, 1974, and amended July 2, 1993.

Subscribed and sworn before me this _____ day of _____, 200 .

LOCATION OF PROPERTY: _____

TAX PARCEL NO. _____

Signature of Notary Public

Applicant Signature

My Commission Expires