



Grain Valley City Hall
711 Main Street
Grain Valley, MO 64029
816-847-6200
Fax: 816-847-6206
www.cityofgrainvalley.org

ROOF PERMIT APPLICATION

DATE: _____ PERMIT NUMBER: _____

PROPERTY ADDRESS: _____

PROPERTY OWNER: _____

PHONE NUMBER: _____ EMAIL: _____

CONTRACTOR: _____

PHONE NUMBER: _____ EMAIL: _____

CONTRACTOR'S LICENSE NUMBER: _____ VALUE OF PROJECT: _____

OVERLAY: _____ COMPLETE TEAR OFF: _____ ROOF MATERIAL: _____

- A MAXIMUM OF ONE OVERLAY IS ALLOWED.
- ICE AND WATER SHIELD IS REQUIRED IN VALLEYS AND FROM THE LOWEST EDGES OF ALL ROOF SURFACES TO A POINT AT LEAST 24 INCHES INSIDE THE EXTERIOR WALL LINE OF THE BUILDING.
- ONE SIGN IS ALLOWED IN THE YARD WHILE WORK IS IN PROGRESS AND MUST BE REMOVED WHEN THE JOB IS COMPLETE.
- CONSTRUCTION DEBRIS SHALL BE CONTAINED IN A DUMPSTER OR TRAILER ON THE JOB SITE AND REMOVED AT COMPLETION OF WORK.
- WORK PERFORMED WITHOUT A PERMIT WILL BE STOPPED IMMEDIATELY AND A DOUBLE PERMIT FEE WILL BE ASSESSED.
- PLEASE CALL FOR FINAL INSPECTION AT COMPLETION OF JOB.

APPLICANT SIGNATURE:

_____ PERMIT FEE: _____

For office purposes only:

BUILDING DEPARTMENT: _____ DATE: _____

APPROVED: _____ NOT APPROVED: _____

COMMENTS: _____

Send completed forms to 711 Main Street, Grain Valley, MO 64029 or to jselck@cityofgrainvalley.org.