

CITY OF ALBUQUERQUE Planning Department Building Safety

RESIDENTIAL RE-ROOF PERMIT <u>Requirements & Fee Information</u>

- Residential re-roof permits may be obtained from the Building Safety office located in the inspection area in the basement level, 600 2nd St., N.W.
- Homeowners <u>may</u> only obtain re-roof permits for a single family dwelling that they own and occupy. New Mexico licensed contractors must obtain re-roof permits when hired to do the job.
- <u>Inspections</u> When work is at lease 50% complete, the Contractor / Homeowner must request inspections by calling (505) 924-3320 or (505) 924-3326 or faxing (505) 924-3970 to the Building Section. A one (1) day notice is required for inspection requests. Failure to obtain a permit prior to starting a job may result in a stop work notice and a double fee.
 - Access will be required.
 - A core sample may be required to determine how many roofs have been applied..

RESIDENTIAL (R-3 OCCUPANCIES ONLY)

ADMINISTRATIVE FEE	INSPECTION FEE	TOTAL
\$15.00	\$20.00	\$35.00

• Materials and methods of application used for recovering or replacing an existing roof covering shall comply with the requirements of Chapter 9 of the 2009 International Residential Code and the 2009 International Existing Building Code.

DISCLAIMER: Handouts should not be used as substitutes for codes and regulations. As an applicant, you are responsible for compliance with all code and rule requirements, whether or not they are described in a handout. The required drawings will depend upon the size, nature and complexity of the project

PHONE (50	Y OF ALBUQUERQUE Planning Department Building Safety 05) 924-3326 FAX (505) 924-3970 DENTIAL RE-ROOF PERMIT	PHONE (50	Y OF ALBUQUERQUE Planning Department Building Safety 05) 924-3326 FAX (505) 924-3970 DENTIAL RE-ROOF PERMIT		
PERMIT NO	_	PERMIT NO	_		
DATE:	_	DATE:	_		
\$ INSPECTION F	EE	\$ INSPECTION F	EE		
\$15.00 ADMINISTRATION FEE		\$ADMINISTRATION FEE			
\$ <u>35.00</u> TOTAL		\$ <u>35.00</u> TOTAL			
JOB ADDRESS:		JOB ADDRESS:			
		CONTRACTOR'S NAME:			
	CONTRACTOR'S ADDRESS:		CONTRACTOR'S ADDRESS:		
LICENSE NO.		LICENSE NO.			
LICENSE TYPE:		LICENSE TYPE:			
CHECK APPROPRIATE BOX		CHECK APPROPRIATE BOX			
BUILT-UP ROOF	ASPHALT	BUILT-UP ROOF	ASPHALT		
SHINGLE	WOOD SHINGLE	SHINGLE	WOOD SHINGLE		
CORRUGATED METAL	SINGLE PLY MEMBRANE	CORRUGATED METAL	SINGLE PLY MEMBRANE		
TILE		TILE			
RE-COVER	REPLACEMENT	RE-COVER	REPLACEMENT		
CALL FOR INSPECTION WHEI 50% COMPLETE	N NEW ROOF IS AT LEAST	CALL FOR INSPECTION WHE	N NEW ROOF IS AT LEAST		
NOTICE: DOUBLE FEES MAY BE CHARGED FOR WORK STARTED WITHOUT FIRST OBTAINING A PERMIT.		NOTICE DOUBLE FEES MAY BE CHARGED FOR WORK STARTED WITHOUT FIRST OBTAINING A PERMIT.			