CITY OF HAYSVILLE
Public Works Department
401 S. Jane
PO Box 404
Haysville, KS 67060
Phone: 316/529-5940 | Fax: 316/529-5945
permits@haysvilleks.gov

Roofing and Siding Permit Application

PROJECT INFORMATION

Project Address:		☐ Residential ☐ 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):	Property Owner Phone:

DESCRIPTION OF WORK

Type of Improvement: ☐ Roofing ☐ Siding ☐ Both			
Roofing Material: ☐ Shake ☐ Comp ☐ Asphalt ☐ Built-up ☐ Other_____ Number of Existing Layers:_____			
Siding Material: ☐ Vinyl ☐ Metal ☐ Other_____			
Total Valuation of Roofing:	PERMIT FEE:	Total Valuation of Siding:	PERMIT FEE:

When installing deck vents, the roofing contractor must provide photo documentation of the deck after all vent openings have been cut and prior to vent installation.

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 ☐ Contractor

DATE:_____

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