



CITY OF ALBUQUERQUE

Planning Department

Building and Safety

COMMERCIAL RE-ROOF CONSTRUCTION

Plans & Permit Information

CONSTRUCTION ADDRESS _____

Valuation of Work _____

Building Permit _____

Building Permit Fee _____

CODE COMPLIANCE

		Yes	No
Type of Application	Does Construction Meet Existing Code?	___	___
<input type="checkbox"/> Built-Up Roof	If No Note Deviations _____		
<input type="checkbox"/> Shingle	_____		
<input type="checkbox"/> Corrugated Metal	_____		
<input type="checkbox"/> Tile	_____		
<input type="checkbox"/> Re-cover	_____		
<input type="checkbox"/> Asphalt			
<input type="checkbox"/> Wood Shingle			
<input type="checkbox"/> Single Ply Membrane			
<input type="checkbox"/> Replacement			
Re-roof	_____		
<input type="checkbox"/> Tear-off	Plan Reviewer		Date
<input type="checkbox"/> Re-cover			

How Many Roofs Are On The Building Now? _____

Type Of Existing Roof(s) _____

Description Of Work: _____

Owner _____ **Phone** _____

Address _____

_____ **Zip** _____

Contractor _____ **Phone** _____

Address _____

_____ **Zip** _____

NM State License No _____

License Classification _____

NM State Tax No. _____

Alb Business Reg. No _____