



City of Patterson
 1 PLAZA
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 Patterson, CA 95363
 (209) 895-8030
 buildingclerk@pattersonca.gov

Office Use Only

Application Date: _____

Customer # _____

PERMIT # _____

WMP to P.W. _____

ESCP to P.W. _____

APPLICATION FOR RE-ROOF PERMIT:

Project Valuation:\$ _____

BUILDING TYPE: Commercial Residential Industrial Other _____

RE-ROOF TYPE: Overlay Tear-off with new sheathing Tear-off without sheathing Other _____

Owner/Builder ? Yes (Owner-Builder form needs to be filled out)

No (Contractors information is required prior to issuance of Building Permit)

Address of Work: _____

Property Owner: _____ **APN#:** _____

Address: _____ **Phone:** _____

City: _____ **Zip:** _____ **Email:** _____

Contractor: _____ **Phone:** _____

Address: _____ **Contractor Lic #:** _____ **Local Lic#** _____

City: _____ **Zip:** _____ **Email:** _____

Applicant: _____ **Date:** _____

Applicant Address: _____ **Phone:** _____

Project Contact Person: _____ **Phone:** _____

Fax: _____ **Print Name and Title** _____
Email: _____

ROOF INFORMATION

SQ. FT: _____ **# of SQUARES:** _____ **PITCH OF ROOF:** _____

OF EXISTING LAYERS/EXISTING ROOF (Maximum of 2) TYPE: _____

PROPOSED TYPE OF ROOFING MATERIAL: _____

PROPOSED UNDERLAYMENT:

1 Layer of 15# felt: _____ 1 Layer of 30# felt: _____ 2 Layers of 15# felt: _____ None: _____

DESCRIBE REPLACEMENT OF ANY ROOF SHEETING AND/OR FRAMING: _____

APPLICANT SIGNATURE

DATE

LICENSED CONTRACTOR DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code and that my contractor's license is in full force and effect and that all of the information provided by me regarding this is true and correct. I also affirm under penalty of perjury that my Worker's Compensation Declaration or Certificate of Exemption from Worker's Compensation Insurance and lending agency information are true and correct.

Signed _____ Dated _____

Print Name of Signer _____

License# _____ License Class _____

WORKER'S COMPENSATION DECLARATIONS

I hereby affirm that I have a certificate of self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3000, Lab. C).

Policy# _____ Company _____

Certified copy is hereby furnished

Certified copy is filled with the building inspection department of the City of Patterson

Applicant Signature _____ Dated _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from provisions of the Contractor's License Law (Chapter 9 of Division 3 of the Business and Profession Code) because: (check applicable statement)

A. I am the owner of the above property and I will contract to have all of the work performed by licensed contractors.

B. I am the owner of the property and the work will be partially accomplished in accordance with Statement "A" and the other work will be accomplished in accordance with Statement "C".

C. I am the owner of the above property and I will perform all the above work personally or through my employees whose sole compensation will be wages, and the above described structure is not intended or offered for sale.

Applicant Signature _____ Dated _____

Print Name of Signer _____

CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation Laws of California.

Applicant Signature _____ Dated _____

NOTICE TO APPLICANT: If after making this Certificate of Exemption you should become subject to the Worker's Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Cir. C).

Lender's Name _____

Lender's Address _____

I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION IS CORRECT. I AGREE TO COMPLY WITH ALL CITY AND COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER THE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

Applicant or Agent Signature _____ Date: _____



**COOL ROOF
CERTIFICATE OF COMPLIANCE
PRESCRIPTIVE RESIDENTIAL REROOF REQUIREMENTS FOR ROOF SLOPES OVER 2/12**

Beginning **July 1, 2014** the 2013 California Energy Code will require the installation of a Cool Roof when more than 50% of an existing roof is being replaced. However, there are exceptions to this requirement. This form specifies the Cool Roofing requirements and provides several options in lieu of Cool Roofing. Cool Roof Products used for compliance with the standards are required to meet or exceed the values specified in Table A and be tested and labeled by the Cool Roof Rating Council (CRRC). The CRRC's Rated Product Directory can be found at www.coolroofs.org.

TABLE A

Roof Slope	Minimum 3-year aged solar reflectance	Minimum Thermal Emittance	SRI
≤2:12	Not required		
>2:12	0.20	0.75	16

If you are using a cool roof product you must provide the information below;

CRRC Product ID Number	Roof Slope	Aged Solar Reflectance	Thermal Emittance	SRI

Any one of the options listed below can be used in lieu of the cool roof requirements for reflectance, emittance, and SRI listed above. Select which one applies:

- Air-space of 1.0 inch airspace is provided between the top of the roof deck to the bottom of the roofing product; **or**
- The installed roofing product has a profile ratio of rise to width of 1 to 5 for 50% or greater of the width of the roofing product; **or**
- Existing ducts in the attic are insulated and sealed according to Section 150.1(f)10, **(HERS rating required with CF-3R Form)**; **or**
- R-38 attic insulation **(Insulation Certificate may be required)**; **or**
- Building has a radiant barrier in the attic meeting the requirements of Section 150.1(f)2. **or**
- Building has no ducts in the attic; **or**
- R-4 insulation is installed above the roof deck.

Applicant's Signature

Date

RESIDENTIAL ROOF NAILING CHANGING FOR 2023 PERMITS

Please be aware that the maximum field nailing for roof sheathing has been reduced. Building Inspectors will be enforcing the new requirements for all permits applied for after December 31, 2022.

Table R602.3(1) Fastening Schedule

Item	Description of Building Elements	Number and Type of Fastener	Edges ^h (inches)	Intermediate Supports (inches)
Wood structural panels (WSP), subfloor, roof and interior wall sheathing to framing and particleboard wall sheathing to framing				
31	3/8" – 1/2"	6d common or deformed (2" x 0.113" x 0.266" head), 2 3/8" x 0.113" x 0.266" head nail (subfloor, wall)	6 ^f	6 ^f
		8d common (2 1/2" x 0.131") (roof) RSRS-01 (2 3/8" x 0.113") nail (roof)	6 ^f	6 ^f
32	19/32" – 3/4"	8d common (2 – 2 1/2" x 0.131") (subfloor, wall)	6	12
		8d common (2 1/2" x 0.131") nail (roof) RSRS-01 (2 3/8" 0.113" x 0.113") nail (roof)	6	6 ^f
		Deformed 2 3/8" x 0.113" x 0.266" head (wall or subfloor)	6	12
33	7/8" – 1 1/4"	10d common (3" x 0.148") nail; or (2 1/2" x 0.131" x 0.281" head) deformed nail	6	12

f. For wood structural panel roof sheathing attached to gable end roof framing and to intermediate supports within 48 inches of roof edges and ridges, nails shall be spaced at 4 inches on center where the ultimate design wind speed is greater than 130 mph in Exposure B or greater than 110 mph on Exposure C.