

BOROUGH OF SWARTHMORE
DELAWARE COUNTY, PENNSYLVANIA
610-543-4599 (phone)
610-543-1833 (fax)

ROOFING AND SIDING PERMIT APPLICATION

Date _____

Location of Building _____

Owner of Building _____

Contractor Name _____

Contractor Address _____

Contractor Telephone/Pager Number(s) _____

Application is for roof repair ___ new roof/reroof ___ siding ___

Existing roof material: _____

New roof material: _____

Number of roofing layers when permitted work is complete: _____

All work must be done in accordance with local codes. No permit will be issued until a Certificate of Insurance is received by the Borough office.

For office use only

Date received: _____

Contractor License #: _____

Date Certificate of Insurance received: _____

Contractor's Insurance Company _____

Fee: \$ _____ Date Paid: _____ Receipt #: _____

Inspector's Signature: _____