



Butte - Silver Bow
Building Code Department
155 West Granite Street Room 108, Butte, MT 59701
Building Permit (Re-Roof) Application

Location Of Project

Number _____ Street _____ City _____ Zip _____

Geocode* _____ Assesment Code* _____

Legal Description _____

Required	Name (print)	Address,City, State, Zip	Telephone Number	Email Address
Owner				
Contact				
Contractor				

Business License Number _____

Detailed Description of Work _____

Roofing			
Sheathing	Sheathing to be repaired, replaced or overlayed?	YES / NO	If Yes Explain:
Metal Roof	Estimated Cost		\$
Rolled Roofing	Estimated Cost		\$
Asphalt Shingles	Number of Existing Layers		
	Tear off being Performed?		YES / NO
	Number of Squares		

Other Roofing _____

Cost _____

Signature of Applicant _____ **Date** _____

Received By _____ **Date** _____

Approved By _____ **Date** _____