



City of Mulvane  
Community Development Department

Roofing Permit Application

Date: \_\_\_\_\_

Permit #: \_\_\_\_\_

Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

State Registration #: \_\_\_\_\_ Lisc#: \_\_\_\_\_

Phone: \_\_\_\_\_

**Number of Layers Removed**

1 layer     2 layers     Re-deck     Other \_\_\_\_\_

**Proposed Use (check one)**

1-family     2-family     multi-family     commercial     detached garage

**Square Footage of Structure:** \_\_\_\_\_

*(total sq. ft., including attached garage, porches, finished area of main floor)*

**Valuation of Roofing:** \$ \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

*\$.05 per sq. ft., based upon the structure footprint (\$50 min / \$1,500 max)*

Forward to:  
City of Mulvane  
211 N. Second  
Mulvane, KS 67110  
Phone (316) 777-1143 Fax (316) 777-4081