

# CITY OF SELMA

1710 TUCKER STREET · SELMA, CALIFORNIA 93662

Contractor/Building Permit Holder

The City of Selma at their March 19, 2007, City Council Meeting and their April 2, 2007, City Council Meeting passed Ordinance No. 2007-3 dealing with modifications to the City's "Garbage Regulations." Section 8-1-15 and 16 of the City Code requires any developer or business owner who need the use of Roll Off Bins for collection of construction debris or other uses and Portable Restrooms within the City of Selma to acquire those items for the City's exclusive Hauler, Waste Management. The new ordinance became effective on April 30, 2007

If you are not currently using Waste Management for these services you may contact the City's contracted waste hauler to arrange for these services to be provided. You may contact **Waste Management at (559) 891-7694.**

If you have any questions please call the City of Selma at (559) 891-2200.

Very truly yours,

*Fernando Santillan*

Fernando Santillan,  
Community Development Director

\_\_\_\_\_  
Owner's Name/Contractor

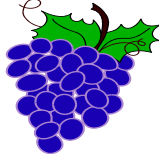
\_\_\_\_\_  
Permit Address

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

BUILDING (559) 891 - 2208 / PLANNING (559) 891 - 2209 / FAX # (559) 896-1068

*Providing Quality Service With Pride and Commitment*

# CITY OF SELMA



1710 Tucker Street Selma, CA 93662  
TELEPHONE (559) 891-2208 FAX (559) 896-1068

## BUILDING DEPARTMENT RE-ROOF PERMIT APPLICATION 20-\_\_\_\_\_

**CONTRACTOR RESPONSIBLE FOR ENCROACHMENT PERMIT IF NEEDED**

DATE: \_\_\_\_\_ PROJECT VALUATION: \$ \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

PERSON PERFORMING WORK: OWNER  CONTRACTOR

Residential

Commercial

### PROPERTY OWNER:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_

### CONTRACTOR:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE #: \_\_\_\_\_

CONTRACTOR'S LIC. # \_\_\_\_\_

### CONSTRUCTION INFORMATION:

TOTAL ROOF AREA: \_\_\_\_\_ square feet TYPE EXISTING ROOF: \_\_\_\_\_ # OF LAYERS \_\_\_\_\_

NEW ROOF TYPE & CLASS: \_\_\_\_\_ TYPE OF SHEATHING \_\_\_\_\_

TOTAL VENTILATION \_\_\_\_\_ square feet TYPE: \_\_\_\_\_ ROOF RAFTER SIZE \_\_\_\_\_ X \_\_\_\_\_

ROOF RAFTER SPACING \_\_\_\_\_" ON CENTER

**SMOKE AND CARBON MONOXIDE DETECTORS ARE REQUIRED IN SPECIFIED LOCATIONS OF ALL RESIDENCES IF VALUATION EXCEEDS \$1,000**

**Note: Inspection required before new roofing materials can be applied.**

\_\_\_\_\_  
OWNER/CONTRACTOR

\_\_\_\_\_  
DATE