

Roof Permit Requirements Permits and Inspections Division

151 W Church Street, Lewisville, Texas 75057

Phone: 972.219.3470

Waiver Request

I,(Homeowner		certify that upon completion of the	roofing project at the below	
noted address, the roofing contractor		(Contractor Name)	_ has inspected and	
verified that all inter	ior requirements have	peen satisfied.		
Project Address:		Permit N	Permit Number:	
Homeowner Signatu	ure:	Date:		
Contractor Signature	e:	Date:	Date:	
STATE OF				
COUNTY OF				
On this	day of	, in the year	, before me	
	, n	otary Public, personally appeared		
		on the basis of satisfactory evidence) to knowledged that he (she/they) execute		
WITNESS my hand	and official seal.			
		Notary's Signatur	re	
		Notary's Name (F	Print)	
		My commission exp	oires:	

This handout is for informational purposes only and should not be relied on in place of official regulations and/or policies. The CITY OF LEWISVILLE makes no representations, guarantees, or warranties as to the accuracy, completeness, currency, or suitability of the information provided via the handout. Customers and citizens are personally responsible for complying with all local, state and federal laws pertaining to projects within the city. Copies of the CITY OF LEWSIVILLE adopted codes and Zoning Ordinances can be found on the city website at http://www.cityoflewisville.com or at the CITY OF LEWISVILLE 151 W. Church Street, Lewisville, Lewisville, and Indiana. Texas 75057

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