

**MUNICIPAL BUILDING**

906 South White Oak Road  
White Oak, Texas 75693



(903) 759-3936  
Fax (903) 297-3452

**ROOF PERMIT**

DATE: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

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

APPLICATION MUST BE FILED 24 HOURS BEFORE PERMIT CAN BE GRANTED.  
APPLICATION IS HEREBY MADE FOR A PERMIT TO ROOF A STRUCTURE  
AT THE ABOVE ADDRESS ONLY.

ROOFING CONTRACTOR: \_\_\_\_\_

CONTRACTOR'S MAILING ADDRESS: \_\_\_\_\_

CONTRACTOR'S PHONE NUMBER: \_\_\_\_\_

MAKING THE APPLICATION, I OR WE PROFESS TO BE FAMILIAR WITH ALL  
ORDINANCES, RULES, AND REGULATIONS OF THE CITY OF WHITE OAK  
RELATING TO BUILDING AND PREMISES. I AGREE TO ABIDE BY ALL  
REGULATIONS & THE LAWFUL DECISION OF THE BUILDING INSPECTOR. I  
SHALL NOT ALTER OR CHANGE THE ACCOMPANYING PLANS,  
SPECIFICATIONS, OR THIS APPLICATION WITHOUT THE APPROVAL OF THE  
BUILDING INSPECTOR. ANY SUCH VIOLATION OR MISREPRESENTATION  
MADE BY ME CAN CONSTITUTE SUFFICIENT GROUNDS FOR REVOCATION  
OF SUCH PERMIT OR STOPPAGE OF WORK.  
THIS APPLICATION WILL BE VOID IF CONSTRUCTION HAS NOT BEEN  
STARTED WITHIN 120 DAYS.

VALUE OF JOB: \_\_\_\_\_

**FEES:** **\$75.00**

\_\_\_\_\_  
CONTRACTOR'S SIGNATURE