



Roofing Operation Permit Application

SCOTTSDALE FIRE DEPARTMENT
FIRE & LIFE SAFETY DIVISION



The following information is required to obtain a use permit for a Roofing Operation.

Company requesting permit _____

Address _____

Phone # _____ Fax # _____ AZROC# _____

Name of event _____

Type of event Kettle Operation Torch Operation

Name of property owner _____

Address where work will be done _____

On site contact person _____

Phone # _____

EVENT DATES AND HOURS OF OPERATION			
	<u>DATE</u>	<u>DAY OF WEEK</u>	<u>HOURS FROM AM/PM TO AM/PM</u>
DAY 1	_____	_____	_____
DAY 2	_____	_____	_____
DAY 3	_____	_____	_____
DAY 4	_____	_____	_____

For events over FOUR days, please list the START date in Day 1 and the END date in Day 4.

See page two for contact information.

Preferred inspection date and time: _____

❖ **A DETAILED SITE PLAN IS REQUIRED FOR ALL PERMIT REQUESTS. ALL ABOVE INFORMATION MUST BE INCLUDED WITH YOUR SITE PLAN**

❖ **AN AERIAL PHOTO SHOWING THE LOCATION OF THE EVENT ON THE PROPERTY AND ANY REQUIRED SAFETY ZONES IS REQUIRED.**

- ❖ FAX THIS FORM TO 480-312-1850 OR
- ❖ EMAIL THIS FORM AND SITE PLAN TO PEARLS@SCOTTSDALEAZ.GOV
- ❖
- ❖ EMAIL THE AERIAL PHOTO TO PEARLS@SCOTTSDALEAZ.GOV
- ❖ QUESTIONS/INFORMATION CALL 480-312-1843