New Westminster

511 Royal Avenue
New Westminster BC
V3L 1H9

604 521 3711
info@newwestcity.ca
newwestcity.ca

Roof Material and Installation Certification

PLEASE SUBMIT TO BUILDING DEPARTMENT PRIOR TO FRAMEINSPECTION
TO BE COMPLETED BY INDEPENDENT INSPECTION COMPANY

To: The Building Inspector
City of New Westminster

Building Permit #_____

Re: address of project _____

This is to certify that the **material and installation** of the: (*Check applicable*)

WOOD SHAKE ROOF
WOOD SHINGLE ROOF
CONCRETE TILE ROOF

for the dwelling(s) located at the above noted property has been installed: (*Check applicable)*

to conform with the applicable sections of wood shake/shingle material and installation in the current edition of the B.C. Building Code and CSA Standard 0118.1 "Western Cedars Shakes and Shingles". This inspection includes all aspects of this roof installation.

as per all requirements of the applicable sections of concrete tile material and installation in the current edition of the B.C. Building Code and the Performance of Concrete Roof Tiles Standard CAN/CSA-A220.0. This inspection includes all aspects of this roof installation.

Certified this _____ day of _____, 20____. by:

Name: _____ Company:_____

Address:_____
Phone:_____ Signature:_____

ROOFING CONTRACTOR	*OWNER/BUILDER*
Business Licence No._____	Business Licence No. _____
Company _____	Company _____
Address _____	Address _____
Principle (print) _____	Owner (print) _____
Phone # _____	Phone # _____
Signature _____	Signature _____

(this form is to be completed by both the owner/builder and the contractor to be acceptable)