



**TOWN OF BLUFFTON
BUILDING PERMIT APPLICATION
RESIDENTIAL RE-ROOFING AFFIDAVIT ONLY**

Growth Management Customer Service Center
20 Bridge Street
Bluffton, SC 29910
(843) 706-4522
www.townofbluffton.sc.gov
applicationfeedback@townofbluffton.com

**Residential Re-Roofing Affidavit Only
Due with Application Submittal**

Permit Number:

Contractor Name:

Owner Name:

Address:

Address:

Phone:

Phone:

Location of Work:

Residential Re-Roofing Regulations

- All Re-Roofing materials have been installed per the manufacturer installation instructions.
- Shingles have been installed per the manufacturers installation instructions based on 140 mph 3 second wind gust in compliance with IRC 301.2.1.3

Certification

The Contractor hereby certifies the above referenced Residential Re-Roofing Affidavit is in accordance with the specification established by the International Residential Code, Professional Designer's specifications, and the manufacturer installation instructions.

Print name

Signature of Contractor/authorized agent

Date