

ROOFING CONTRACTOR APPLICATION

City of La Cygne, Kansas

Company Name: _____ Date of Application: _____

Company Address: _____

Phone: _____ Cell: _____ Fax: _____ E-Mail _____

Work Site Address: _____ La Cygne KS 66040
House Number & Street Name City State Zip

Description of proposed project:.

Insurance Company: _____

(Attach/Email a valid Insurance Certificate to lccityhall@peoplestelecom.net)

- Contractor Company is required to be registered with the Kansas Roofing Registry. Contact the Attorney General's office (800)-432-2310.
- The City of La Cygne follows the Uniform Building Codes Standards.
- The City of La Cygne does not have code requirements for Ice/Water (Ice/Snow) Shields.
- A Building Permit is required if the roofing project changes the footprint, slope or specifications of the original roof.

I acknowledge that I have reviewed this application in its entirety and all information is true and accurate to the best of my knowledge.

Signed: _____
Applicant's Signature