

**COUNTY OF RIVERSIDE, DEPARTMENT OF BUILDING AND SAFETY  
RE-ROOF WORK SHEET/ CERTIFICATION**

**PART-1 SITE ADDRESS**

**AGE OF BUILDING**

**PART-2 EXISTING ROOF (CHECK ONE)**

ROOF COVERING					ROOF DECK	
COMPO.	WD-SHAKE	HOT-MOP	TILE	OTHER	SOLID	SPACED

**PART-3 NEW ROOF (CHECK ONE)**

Additional layer to existing	Replace existing layer with the same	New conc/ clay tile
<b>GO TO PART-4</b>	<b>GO TO PART-7</b>	<b>GO TO PART-5</b>

if checked:

**PART-4 ADDING LAYER WITH SAME ROOF COVERING**

COUNT OF EXISTING LAYERS : \_\_\_\_\_

If this number is 3 or more, REMOVE ALL layers before placing the new layer **GO TO PART-7**

**PART-5 TILE MANUFACTURER**

**ICBO#**

**WEIGHT (PSF)**

**STYLE**

If the weight is over 6.5 PSF, or combined weight (new tile + solid decking over existing deck) is over 6.5 psf, GO TO PART-6, otherwise GO TO PART-7.

**PART-6 THIS PART MUST BE PREPARED BY A REGISTERED CIVIL ENGINEER / ARCHITECT**

**I, a registered Civil engineer or Architect, certify that the following documents are prepared by me based on my structural observation for the structure on the address shown in PART-1.**

**NAME**

**LIC #**

**DATE**

1. STRUCTURAL CALCS FOR GRAVITY/ LATERAL
2. FRAMING AND FOUNDATION PLAN DRAWN TO SCALE
3. CONNECTION DETAILS FOR STRENGTHENING

**SEAL & SIGNATURE**

**SUMMARY OF STRENGTHENING WORKS NEEDED**



**PART-7 OWNER/ APPLICANT CERTIFICATE**

**I certify that the information on this form is true and correct.**

**NAME**

**SIGNATURE**

**DATE**

**A COPY OF THIS FORM MUST BE ATTACHED TO THE JOB CARD**