



RESIDENTIAL REROOF PACKET

Town of Fairview

372 Town Place

Fairview Texas 75069

Phone: 972.886.4209

Fax: 972.548.0268

Inspection Line: 972.886.4250

inspections@fairviewtexas.org

permits@fairviewtexas.org



TOWN OF FAIRVIEW
RESIDENTIAL ADDITION/REMODEL/ACCESSORY
STRUCTURE PERMIT APPLICATION

Project Address _____ Subdivision/Lot/Block _____

Property Owner (Name, Address, Phone, & Email) _____

General Contractor: _____ Phone: _____ Email _____

General Contractor Address: _____

Trash Hauler Contractor: _____ Anything over \$10,000 requires a listed trash hauler on your permit
WHEREAS the Town, therefore, desires to grant to Republic Services the right to operate as the sole provider for Town-provided services of collection, transportation, and disposal of residential, commercial, and industrial (both permanent and temporary) Garbage and Trash, Construction and Demolition Debris, and Recycling, subject to the terms of this Contract. Additional questions, service requests and concerns, should be directed to the Republic Services at 972-422-2341 or via their website at RepublicServices.com/Customer-Support.

RESIDENTIAL WORK BEING DONE:
[] Addition [] Pergola [] Remodel
[] Detached Accessory Structure [] Residential Demo
Scope of Work: _____

Valuation of work \$: _____ Square Footage _____ in/ft (Total under roof)
Subject property is ___ or is not ___ within the flood hazard area. Required lowest floor elevation is _____.

NOTE: There may be required forms and information sheets for the specific type of work being done.. Please contact the permits department for required submittal.

- Remote Virtual Inspections RVI Instructions:
• All remote inspections should be scheduled a minimum of one business day prior to the requested date.
• Schedule inspection either on-line or by telephone. inspections@fairviewtexas.org / 972-886-4250
• Schedule after-hours or emergency inspections on a case-by-case basis. Additional fees apply.
• Video telephony platform: Face-time (Note: Please leave a call back number for the inspector if you are requesting face time.)
• When scheduling the inspection, provide the address, permit number, and type.
• Remote virtual inspection (RVI) may be done via live stream, pictures, video or any combination.

Electric Provider: _____ Gas Provider: _____ Note: Please allow 7-10 business days for processing

NOTICE TO APPLICANT: This permit is issued based on information furnished in this application and on any submitted plans and is subject to the provisions and requirements of the Town of Fairview Code of Ordinances and any other applicable ordinance. This permit is used only for the purpose of allowing construction of a building or structure conforming to the codes and ordinances of the Town, regardless of information and/or plans submitted. Separate subcontractor permits are required. The permit holder is required to use only subcontractors registered with the Town of Fairview, where such a requirement is applicable.

APPLICANT SIGNATURE _____ DATE _____
TOWN APPROVED _____ PLAN REVIEW DATE _____
PICKUP SIGNATURE _____ DATE _____

TOWN OF FAIRVIEW, 372 TOWN PLACE, FAIRVIEW, TEXAS 75069, 972-562-0522
AUTOMATED INSPECTION LINE: 972-886-4250
MAY 2025

ALL PERMITS MUST BE SUBMITTED TO: permits@fairviewtexas.org



The Town of Fairview has adopted the 2018 International Residential Code and conducts plan review and inspections based on chapter 9 of the 2018 IRC, and the 2018 IFC.

The 2018 International Residential Code (IRC). Roofing materials must be installed in accordance with Chapter 9 of the 2018 IRC and the manufacturer's installation instructions (R901.1).

Building permits are required for re-roofing existing dwellings. Building permit fees are established by the municipality. Building inspections are performed at various stages to verify code compliance.

Roof replacement shall include the removal of the existing layers of roof coverings down to the deck. See R908.3.1 for exceptions to the code for re-roof re-cover.

Wind Design for Fairview Texas is 115 3 second gust and 76 MPH .

****Section R902.1;** amend and add exception #5 to read as follows:

R902.1 Roofing covering materials. Roofs shall be covered with materials as set forth in Sections R904 and R905. Class A, B, or C roofing shall be installed designated by law as requiring their use or when the edge of the roof is less than 3 feet from a lot line. {remainder unchanged}

Exceptions:

1. {text unchanged}
2. {text unchanged}
3. {text unchanged}
4. {text unchanged}
5. Non-classified roof coverings shall be permitted on one-story detached accessory structures used as tool and storage sheds, playhouses and similar uses, provided the floor area does not exceed (area defined by jurisdiction).

R903.2.2 Cricket and saddle

Install a cricket or saddle on the ridge side of any chimney greater than 30 inches wide. Cricket or saddle coverings must be sheet metal or the same material as the roof covering.

R905.2.8.5 Drip Edge

A drip edge shall be provided at eaves and rake edges of shingle roofs

R905.2.8.2 Valleys

Valley linings shall be installed in accordance with the manufacturer's instructions before applying shingles. Valley linings of all types shall be permitted.

See Table R905.2.8.2 Valley and lining material

Fasteners for asphalt shingles: must be galvanized steel, stainless steel, aluminum or copper roofing nails, minimum 12 gage shank with a minimum 3/8-inch head, of a length to penetrate through the roofing materials and a minimum of 3/4 inch into the roof sheathing. Where the roof sheathing is less than 3/4 inch thick, the fasteners must penetrate through the sheathing. Fasteners must comply with ASTM F 1667. Staples are not permitted for shingle application unless specifically noted in the manufacturer's installation instructions on the shingle package.

The minimum roof slope for metal roof shingles is 3:12. See special installation requirements from the manufacturer and IRC. (R905.4)

The minimum roof slope for mineral surfaced rolled roofing is 1:12. See special installation requirements from the manufacturer and IRC. (R905.5)

The minimum roof slope for slate and slate-type shingles is 4:12. See special installation requirements from the manufacturer and IRC. (R905.6)

The minimum roof slope for wood shingles is 3:12. See special installation requirements from the manufacturer and IRC. (R905.7)

The minimum roof slope for wood shakes is 3:12. See special installation requirements of manufacturer and IRC. (R905.8)

The minimum roof slope for built up roofing is 1/4:12. See special installation requirements from the manufacturer and IRC. (R905.9)

The minimum roof slope for lapped, no soldered-seam metal roof panels is 3:12. See special installation requirements from the manufacturer and IRC. (R905.10)

The minimum roof slope for standing-seam roof systems is 1/4:12. See special installation requirements from the manufacturer and IRC. (R905.10)

The minimum roof slope for modified bitumen roofing is 1/4:12. See special installation requirements from the manufacturer and IRC. (R905.11)



Contractor Registration Application
(Select Only One Type Per Application)

Contractor Type:

- General Contractor** **If renewal check here:**
- Swimming Pool** **Cost for these contractors:**
- Fence** **\$50.00 New**
- Irrigation** **\$25.00 Renewal**
- Sign**

Contractor Type:

- Plumbing**
- Fire Alarm** **There is no charge for these contractor types**
- Fire Sprinkler (Suppression)** **Expiration based on License/Certificate expiration date**
- Mechanical** **If renewal check here:**
- Backflow/Septic**
- Electrical**

Company Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ **Email:** _____ **@** _____

Master/CEO Responsible for Supervision: _____

License/Certificate # _____ **Expiration Date:** _____

Driver's License # _____ **Expiration Date:** _____

I understand and agree that the above named shall be responsible for continuous supervision of all installation of all installations and repairs performed in the Town of Fairview under the above-named contractor and should such Master Licensee no longer be employed, no further work shall be performed until registration has been provided to the Building Inspections Department naming a new Master License holder. I will request all necessary inspections by the Town of Fairview to ensure compliance with all city regulations applicable for the proposed work.

Contractor's Signature: _____ **Date:** _____

*******Include a copy of your driver's license, master's license and/or certificate AND liability COI with the Town of Fairview identified as the Insured for processing**

******* Email information to: permits@fairviewtexas.org**

Information not received thru permits@fairviewtexas.org will not be processed.



Inspection Request

Inspection hours are from 8:00am-4:00 pm Monday – Friday. To request your inspection please call the Inspection Request line at 972-886-4250 or at inspections@fairviewtexas.org before 4:00 PM to receive your inspection the next business day. If you call in your inspection on Saturday or Sunday you will not receive your inspection until Tuesday.

Please provide:

1. Your name
2. The address where work is to be inspected. Suite Numbers. Lock Box code and instructions to the inspector if needed for entry. Example: “Access hatch is in electrical room on north side of building “or “Homeowner will meet you between 11am and 1pm”
3. Call back telephone number/ onsite contact if required.
4. Permit number
5. Type of inspection
6. Time you are requesting the inspection to take place.
7. If you are requesting an RVI inspection, please have all photos uploaded to your permit prior to calling for RVI inspection.

Please note: When calling for inspections, the inspection will be scheduled for the next business day. If you need same day inspection, we must receive it by 8:00am or it will be assigned the next business day.

Emergency Inspections may be called in at anytime and will incur a \$75.00 inspection fee and must be paid prior to inspection. Emergency inspections on weekends will incur a \$150 inspection fee and you must call 469.628.4913. Please leave detailed voice mail and return contact number.



Photo/Video Inspection Certification

I hereby swear and affirm that the photos and/or videos which I have submitted for review in conjunction with the Permit listed below is a true and accurate documentation of the work performed.

I acknowledge that by submitting inaccurate or incorrect information, photos or videos, I am falsifying official government documents of the Town of Fairview and may be prosecuted to the fullest extent of the law, which may include fines and citations from the Town of Fairview and further action from the State of Texas. I also understand that the Town of Fairview may not accept these photos and/or videos as sufficient and may require an onsite visit or more photo/video documentation.

*This must be signed and on file prior to scheduling this inspection.

PERMIT NUMBER: _____ DATE: __ __ __ __

ADDRESS OF WORK PREFORMED: _____

TYPE OF WORK: _____

NAME OF COMPANY: _____

PRINT NAME OF (CONTRACTOR/RMP): _____

LICENSE NUMBER OF (CONTRACTOR/ RMP): _____

SIGNATURE OF (CONTRACTOR/ RMP): _____