

**TOWN OF BERKLEY  
PERMIT REVIEW SHEET**

Property Address: \_\_\_\_\_

**ROOF**

Pitch \_\_\_\_\_ Roofing Material \_\_\_\_\_ Roofing Paper \_\_\_\_\_  
Soffit Vent \_\_\_\_\_ Ridge Vent \_\_\_\_\_ Gable Vent \_\_\_\_\_  
Roof to be Stripped    Yes    No

\_\_\_\_\_  
\_\_\_\_\_

**DOORS AND WINDOWS**

Door Size \_\_\_\_\_ Door Type \_\_\_\_\_ Number \_\_\_\_\_  
Window Type \_\_\_\_\_ Number \_\_\_\_\_  
Bedroom Window Opening \_\_\_\_\_ Sill Inches from Floor \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**SIDING**

Type \_\_\_\_\_ Building Paper \_\_\_\_\_