



DECLARATION OF LICENSED ROOFING CONTRACTOR

CNI-021

PURPOSE

This form is to be completed by a licensed roofing contractor participating in the Sonoma County Self Certification Reroofing Program as outlined in the Sonoma County Reroofing Manual.

\_\_\_\_\_  
Permit Number

\_\_\_\_\_  
Contractor

\_\_\_\_\_  
License No.

1. I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect (Class C-39).
2. I certify that I have reviewed and understand the Sonoma County Reroofing Manual and agree to follow all the requirements therein as they pertain to the installation of roofing and roofing substrate materials on structures located within the unincorporated areas of Sonoma County.
3. I agree to furnish Permit Sonoma proof of liability insurance from an acknowledged underwriting firm for all roofing operations within Sonoma County. Said coverage shall be no less than \$500,000 each occurrence and \$1,000,000 aggregate. I also agree to furnish proof of Workers Compensation Insurance.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**INSPECTOR'S COPY**

