



Virtual Inspection Checklist Re-Roof Final

Contractor _____

Permit Number _____

Address _____

Technicians Name _____

Technicians Phone _____

Required Images and Sequence - Please video or photograph the following items in the order listed:

- Permit
- Front elevation of home/business
- Each plane of roof system
- Roof slope on a gauge or with level and ruler
- Cricket
- Ridge cap or vent (as applicable)
- Off ridge vents (if applicable)
- Plumbing boots
- Electrical service boots
- Fasteners, type and location
- Rake cement
- Valley cement
- Valley free of fasteners

Signature _____

Date _____