



## TEAR-OFF ORDER FORM

Roof Tear-off Date: \_\_\_\_\_

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Job Address: \_\_\_\_\_ 1st  2nd

### TYPE OF ROOF

**Composition:** 3-Tab  Dimensional  Presidential

**Wood:** Shingles  Shake  Cal Shake  Hardi Shake  Cemwood

**Flat:** Tar & Gravel  Cap Sheet  Torch Down  Rock Sweep Only

**Tile:** Concrete  Clay  Metal

**Other (specify):** \_\_\_\_\_

### ROOF PITCH

5/12  6/12  7/12  8/12  9/12  10/12  11/12  12/12  **Other:** \_\_\_\_\_

Total Squares: \_\_\_\_\_ Layers: \_\_\_\_\_ # of Stories: \_\_\_\_\_

**Tear-Off:** House: \_\_\_\_\_ Garage Attached: \_\_\_\_\_ Garage Detached: \_\_\_\_\_

Patio: \_\_\_\_\_

**Access:** Direct to Building: \_\_\_\_\_ Ground Drop: \_\_\_\_\_

**Gutters:** Stay  Remove

**Roof Metal:** Stay  Remove

**Antenna (s):** Stay  Remove

**Recycle Ticket Required?:** Yes  No

**Note:**