



THE DEVELOPMENT CONTROL AND PLANNING BOARD

P O Box 597
Bladen Commercial Development
Basseterre, St. Kitts

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ROOF REPLACENT FORM

APPLICANT INFORMATION

Name _____ Contact No. _____

Address _____

PROPERTY INFORMATION

Location _____

PROJECT INFORMATION

Type of Development _____

Roof Composition _____

Finished Roof Material _____

Area of Roof _____

COST OF DEVELOPMENT

Materials EC\$ _____ Labour EC\$ _____ Total EC\$ _____

ALL APPLICATIONS MUST BE SUBMITTED IN TRIPPLICATE

I hereby certify that the information provided above is accurate and true to the best of my knowledge

Applicant

Applicant's Agent

Date

Date

OFFICE USE ONLY

Accepted by _____ Date _____

Application Fee _____ Application No. _____ Receipt No. _____

DCPB Approval No. _____ DCPB Approval Date _____

Paid Stamp

Date Stamp

Approval Stamp