

Roof Replacement or Repair Application #78562



Tuesday, August 18, 2026 2:16 PM

Checklist:

___ Address	___ Application Submitted	
___ Drive/ROW	___ Zoning Review	___ Legal Lot of Record
___ Septic	___ Plans Reviewed	___ Flood Zone
___ Site Use Approved	___ Required Inspections Assigned	___ FDEP Needed
___ Docs Reviewed/Accepted	___ Invoiced	

APPLICANT: Lamanda Mote

PHONE: (386) 288-9673

ADDRESS: 301 SW Faul Court Lake City, FL 32024

OWNER: CROLEY JEFFREY W, CROLEY LINDA P

PHONE: (423) 322-2315

ADDRESS: 782 SW ROSEMARY DR LAKE CITY, FL 32024

PARCEL ID: 03-4S-16-02731-138

SUBDIVISION: PRESERVE AT LAUREL LAKE UNIT 1

LOT: 138

BLOCK:

PHASE:

UNIT:

ACRES: 0.27

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
HARRY D ANDERSON JR	General	CCC1326114	SOUTHEASTERN COATINGS & WATERPROOFING, INC.

ROOFING JOB DETAILS

Type Roofing Job	Replacement - Tear off Existing and Replace
Further Job Details (Explain if decking is being replaced and or Repairs are being done.)	take off old shingles and put on new
Type of structure	House
Further Structure Details (if needed)	
Total Estimated Cost	24850
Commercial or Residential	Residential
Roof Area (for this job) Sq Ft	
No. of Stories	1
Ventilation:	Off-ridge Vent
Flashing:	Replace All
Drip Edge:	Replace All
Valley Treatment:	New Mineral Surface
Roof Pitch	4:12 or Greater
Second Roof Pitch (if applicable)	
Any cable and/or race-way wiring located on or within the roof assembly?	No
Is the existing roof being removed?	Yes
Explain if not removing the existing roofing material?	
Type of New Roofing Product	Asphalt Shingles
Florida Product Approval Number	FL16305.R13
Product Manufacturer	GAF
Product Description	Shingles
Other Roofing Product Type Not Listed	

Sealed roof decking options: (Must select an option.)

two layers of felt underlayment comply ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified.

Sealed roof decking explanation for other option.

Review Notes: