

Roof Replacement or Repair Application #78514

Friday, August 14, 2026 9:42 AM



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: Cordone Poe

PHONE: (508) 989-8607

ADDRESS: 2190 Johns Bluff Rd S Ste 2 Jacksonville, 32246

OWNER: WEEKLEY BRIAN K,

PHONE: (386) 365-1607

ADDRESS: 195 SW STAFFORD CT LAKE CITY, FL 32024

PARCEL ID: 15-4S-16-03023-371

SUBDIVISION: CALLAWAY UNIT 3

LOT: 71 BLOCK: PHASE: UNIT: ACRES: 0.51

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
TIMOTHY C POE	General	CCC1337152	ROOF RIDERS LLC

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.)	App 34 sq Shingles OC FL10674 6/12 Pitch
Type of structure	House
Further Structure Details (if needed)	Single Family Home
Total Estimated Cost	20400.00
Commercial or Residential	Residential
Roof Area (for this job) Sq Ft	3400
No. of Stories	1
Ventilation:	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	FL10674
Product Manufacturer	Owens Corning
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: