

Columbia County Building Permit Application
Re-Roof's, Roof Repairs, Roof Over's

For Office Use Only Application # _____ Date Received _____ By _____ Permit # 46629

Plans Examiner _____ Date _____ NOC Deed or PA Contractor Letter of Auth. F W Comp. letter
 Product Approval Form Sub VF Form Owner POA Corporation Doc's and/or Letter of Auth.

Comments _____

Applicant (Who will sign/pickup the permit) Joseph Peurung FAX _____ Phone 386-362-9223

Address 210 Barts Terrace, Lake City, FL 32055

Owners Name Joseph Peurung Phone 386-362-9223

911 Address 725 NW Country Lake Drive, Lake City, FL 32055

Contractors Name _____ Phone _____

Address _____

Contractors Email jpeurung@gmail.com ***Include to get updates for this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

Property ID Number 36-35-17-07419-000

Subdivision Name College Manor Lot 1 Block B Unit 1 Phase _____

Special Driving Instructions (only) _____

Construction of (circle) Replacement-Tear off Existing and Replace; Overlay with Metal Recover-New Material over Existing; Partial Roof Repairs or Other Roof

Ventilation: (circle) Ridge Vent; Off ridge vent; Powered Vent; Unvented

Flashing: (circle) Use Existing; Repair Existing; Replace All Replace w/L-Flashing; Replace w/step-Flashing

Drip Edge: (circle) Use Existing; Repair Existing; Replace All

Valley Treatment: (circle) Use Existing; New Metal; New Mineral Surface

Cost of Construction \$2,600.00 Commercial OR X Residential

Type of Structure (House; Mobile Home; Garage; Exxon) House

Roof Area (For this Job) SQ FT 15 squares Roof Pitch 3 /12, 3 /12 Number of Stories 1

Is the existing roof being removed _____ If NO Explain Roof over existing shingles with synthetic underlayment.

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Metal