

Roof Replacement or Repair Application #78937



Thursday, September 17, 2026 11:11 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: JESSICA AMWAKE

PHONE: (352) 317-7066

ADDRESS: 492 SE ROBINWOOD PL HIGH SPRINGS, FL 32643

OWNER: AMWAKE JESSICA A,

PHONE: 352-317-7066

ADDRESS: 492 SE ROBINWOOD PL HIGH SPRINGS, FL 32643

PARCEL ID: 10-7S-17-09976-021

SUBDIVISION: SHERWOOD FOREST UNIT 2

LOT: 19

BLOCK:

PHASE:

UNIT:

ACRES: 1.00

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
AMWAKE JESSICA A,	General		

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.)

Type of structure Mobile Home

Further Structure Details (if needed)

Total Estimated Cost 2000.00

Commercial or Residential Residential

Roof Area (for this job) Sq Ft 1500

No. of Stories 1

Ventilation: Ridge Vent

Flashing: Replace All

Drip Edge: Replace All

Valley Treatment: New Metal

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?

Is the existing roof being removed?

Explain if not removing the existing roofing material?

Type of New Roofing Product Asphalt Shingles

Florida Product Approval Number 10674-R20

Product Manufacturer OWENS CORNING

Product Description SUPREME 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: