

Roof Replacement or Repair Application #78503

Thursday, August 13, 2026 9:37 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: SHERELLE HILL

PHONE: (762) 218-0040

ADDRESS: 114 NW DAUGHTRY GLN LAKE CITY FL 32055

OWNER: HILL EARNEST L

PHONE: 762-218-0040

ADDRESS: 114 NW DAUGHTRY GLN LAKE CITY, FL 32055

PARCEL ID: 28-3S-16-02372-127

SUBDIVISION: EMERALD LAKES PHASE 1

LOT: 27 BLOCK: PHASE: UNIT: ACRES: 0.59

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
HILL EARNEST L	General		

ROOFING JOB DETAILS

Type Roofing Job	Other
Further Job Details (Explain if decking is being replaced and or Repairs are being done.)	SHINGLE OVER SHINGLE
Type of structure	House
Further Structure Details (if needed)	
Total Estimated Cost	2500
Commercial or Residential	Residential
Roof Area (for this job) Sq Ft	
No. of Stories	1
Ventilation:	Off-ridge Vent
Flashing:	Replace with L-Flashing
Drip Edge:	Use Existing
Valley Treatment:	Use Existing
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?	ONE LAYER OF SHINGLES OVERLAY
Type of New Roofing Product	Asphalt Shingles
Florida Product Approval Number	10124-R31
Product Manufacturer	GAF
Product Description	SHINGLES
Other Roofing Product Type Not Listed	
Sealed roof decking options: (Must select an option.)	Other (explain)

Review Notes: