Roof Replacement or Repair Application #75970

Friday, April 17, 2026 8:25 AM

Checklist:

____Address
____Drive/ROW
____Septic
____Site Use Approved
____Docs Reviewed/Accepted
____Application Submitted
____Zoning Review
____Plans Reviewed
____Required Inspections Assigned
____Invoiced
____Legal Lot of Record
____Flood Zone
____FDEP Needed

APPLICANT: Amberly Schmidt **PHONE:** (352) 472-3228

ADDRESS: 17810 NW US HWY 441, High Springs, FL 32643

OWNER: BESSINGER JAMES M **PHONE:** (386) 466-6244

ADDRESS: 256 SW MICHIGAN ST LAKE CITY, FL 32025

PARCEL ID: 08-4S-17-08284-000 **SUBDIVISION:** LAKESIDE HEIGHTS

LOT: 6 **BLOCK:** 15 **PHASE:** **UNIT:** **ACRES:** 0.41

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
Grady Stephens	General	CCC1336120	Worthmann Roofing and Gutters

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	House
Further Structure Details (if needed)	
Total Estimated Cost	19869.00
Commercial or Residential	Residential
Roof Area (for this job) Sq Ft	3157
No. of Stories	1
Ventilation:	Ridge Vent
Flashing:	Use Existing
Drip Edge:	Replace All
Valley Treatment:	New Mineral Surface
Roof Pitch	2:12 to 4:12
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	FL10124.2
Product Manufacturer	GAF
Product Description	GAF Timberline HDZ Series
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 Ill 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: