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

For Office Use Only Application # Date F	Received	By Permit #
Plans Examiner Date □ NOC □ Deed o	or PA 🗆 Contractor I	etter of Auth. □ F W Comp. letter
□ Product Approval Form □ Sub VF Form □ Owner POA		
Comments		
		FAX
Applicant (Who will sign/pickup the permit)		
Address		
Owners Name		
911 Address		
Contractors Name		
Address		
Contractors Email		*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	_	
Subdivision Name	Lot	Block Unit 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		_
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 Miner	ral Surface	
Cost of Construction 7260.	Commercia	I OR $\underline{\hspace{0.1cm}}^{\hspace{0.1cm} \chi}$ Residential
Type of Structure (House; Mobile Home; Garage; Exxon)		
Roof Area (For this Job) SQ FT Roof Pitc	h/12,	/12 Number of Stories
Is the existing roof being removed If NO Explain		
Type of New Roofing Product (Metal; Shingles; Asphalt Flat)		Revised 5.20.21