

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

**For Office Use Only** Application # 55282 Date Received \_\_\_\_\_ By \_\_\_\_\_ Permit # 44726  
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) Jimmy E. SOLER FAX \_\_\_\_\_ Phone 352-222-5998  
Address 366 SW. GASTONIA CT. FORT WHITE, FLA. 32038  
Owners Name Jimmy E. SOLER Phone 352-222-5998  
911 Address 336 SW. GASTONIA CT. FORT WHITE, FLA. 32038  
Contractors Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Contractors Email Soler44@windstream.net \*\*\*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 NEW 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 3,000 \_\_\_\_\_ Commercial OR ☒ Residential

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

Roof Area (For this Job) SQ FT 1,624 Roof Pitch 6 /12, 12/12 Number of Stories 1

Is the existing roof being removed \_\_\_\_\_ If NO Explain YES

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) METAL Revised 5.20.21