

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

For Office Use Only Application # 66194 Date Received \_\_\_\_\_ By \_\_\_\_\_ Permit # 50339

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) Mike Roberts FAX \_\_\_\_\_  
Address 657 S.W. Catherine Ave Phone 386-755-9476  
Owners Name Mike Roberts Phone Same  
911 Address ~~Same~~ 256 SW Chesterfield Cir L.C. FL  
Contractors Name \_\_\_\_\_ Phone 32024  
Address \_\_\_\_\_

Contact Email 386-755-9476 \*\*\*Updates will be sent here

FeeSimple Owner Name & Address Same

Bonding Co. Name & Address None

Architect/Engineer Name & Address \_\_\_\_\_

MortgageLenders Name & Address None

Property ID Number \_\_\_\_\_

Subdivision Name Crosswinds Subdivision Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_

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 Mineral Surface

Cost of Construction 7,000.00 ☐ Commercial OR ☒ Residential

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

2,900 sq. Ft. Roof Area (For this Job) SQ FT Same

Roof Pitch 6/12 /12 Number of Stories 1 Is the existing roof being removed \_\_\_\_\_ If NO

Explain Roof over 1st time

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) \_\_\_\_\_ Revised 12/2023