

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

For Office Use Only Application # _____ Date Received _____ By _____ Permit # 46738

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 _____

FAX _____

Applicant (Who will sign/pickup the permit) GARY JOHNSON Phone 386-961-3031

Address 1907 SE County Club Road LAKE CITY FL 32025

Owners Name MICHELLE LYAN METIVIER Phone 386-365-2452

911 Address 304 NW KENSINGTON LANE LAKE CITY FL 32055

Contractors Name GARY JOHNSON CONST INC Phone 386-961-3031

Address PO BOX 1016 LAKE CITY FL 32056

Contractors Email GJC 49@ICLOUD.COM ***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 27-35-16-02315-108

Subdivision Name WINDSOR COURT Lot 8 Block _____ Unit _____ Phase 1

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 Mineral Surface

Cost of Construction \$13,300.00 _____ Commercial OR ☒ Residential

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

Roof Area (For this Job) SQ FT 2000 Roof Pitch 3 /12, _____ /12 Number of Stories 1

Is the existing roof being removed No If NO Explain _____

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