Columbia County Building Permit Ap Re-Roof's, Roof Repairs, Roof O	pplication
For Office Use Only Application # 48500	1/8 By/M6 Permit # 4/354
Date Received of	
TWO Deed of PA	ntractor Letter of Auth. FW Comp. letter
Product Approval Form Sub VF Form Owner POA Corporat	fon Doc's and/or Letter of Auth.
01	FAX
pplicant (Who will sign/pickup the permit) Bobert Ogles #	Phone 386-590-4611
address 505 boldkist Blad Line Oak F1 3206	4
Owners Name Denise Cormier	Phone 941-524-3384
11 Address 206 SE Pittman Ct Lake City FI	3 2 0 2 5
ontractors Name Robert Oyles #	Phone 386-590-4611
ddress 505 bold Kist Blud Live Oak F1 3206	Fnone 3 60 > 60 100
	HARLEST CONTRACTOR OF THE STATE
intractors Email Ogles Poofing & Grandill. com	***Include to get updates for this job
e Simple Owner Name & Address	
nding Co. Name & Address ////	
chitect/Engineer Name & Address	
rtgage Lenders Name & Address ///F	
perty ID Number 11-55-17-09208-003	
odivision NameN/R	
	Lot Block Unit Phase
ring Directions Take 441 east to 41 make let	t go to SE myrtis rd
lake left go to Pittman ct make left	address at end
	and the different
struction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other	
of Construction 5,500 con	nmercial OR V Residential
	nmercial OR V Residential
of Structure (House Mobile Home; Garage; Exxon)	
Area (For this Job) SQ FT 1500 Roof Pitch 5 /12	2,/12 Number of Stories 1
e existing roof being removed No If NO Explain yes	Tomos of siones 1
of New Roofing Product (Metal; Shingles) Asphalt Flat)	
cation is hereby made to obtain a permit to do work and installation lation has commenced prior to the issuance of a permit and that all we regulating construction in this jurisdiction. CODE: 2014 Florida is	s as indicated I certify that
ws regulating construction in this jurisdiction. CODE: 2014 Florida	work be performed to meet the attack

Ap

Page 1 of 2 (Both Pages must be submitted together.)

Revised 7-1-15