

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

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For Office Use Only Application # 55659 Date Received _____ By _____ Permit # 44955

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) Paul Spicer FAX _____
Phone 386 590 1040

Address 1880 SW CR 778 Ft. White FL 32038

Owners Name Lisa Bradley Phone 386 965 6908

911 Address 187 SE Montrose ave Lake City FL 32025

Contractors Name Paul Spicer/SPICER Construction Phone 386 590 1040

Address 1880 SW CR 778 Fort White FL 32038

Contractors Email SPICERbuilder@gmail.com ***Include to get updates for this job.

Fee Simple Owner Name & Address N/A

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

Property ID Number 33-35-17-06587-000

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 Mineral Surface

Cost of Construction 9500 _____ Commercial OR X Residential

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

Roof Area (For this Job) SQ FT 1300 Roof Pitch 4 /12, _____ /12 Number of Stories 1

Is the existing roof being removed NO Explain 29 GA metal Roof over exist Shingles.

Type of New Roofing Product (Metal); Shingles; Asphalt Flat) metal