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

For Office Use Only Application # 54740 Date Received \_\_\_\_\_ By \_\_\_\_\_ Permit # \_\_\_\_\_

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) Robert Fensel FAX \_\_\_\_\_  
Phone (386) 961-2774

Address Robert Fensel 537 SW Sable Ave L.C. FL. 32024

Owners Name Terri Harris Phone (954) 812-0583

911 Address 1024 SW Rossborough Ct unit 102

Contractors Name Robert Fensel Phone (386) 961-2774

Address 537 SW Sable Ave L.C. FL. 32024

Contractors Email RobFensel@gmail.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 06-45-17-08020-108

Subdivision Name Cross Creek Estate Lot 8 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 NO Valley

Cost of Construction 6000.00 Commercial OR ☒ Residential

Type of Structure (House; Mobile Home; Garage; Exon) Condo

Roof Area (For this Job) SQ FT 1400 sq ft Roof Pitch 5 /12, 5 /12 Number of Stories 1

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

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