

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

4

For Office Use Only Application # 63131 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 _____

FAX _____
Applicant (Who will sign/pickup the permit) Mary Carol Johnson Phone 386-397-4851
Address 8499 NW LK Jeffery Rd Lake City FL 32055
Owners Name Lumarii Gonzalez Phone 808-679-2268
911 Address 124 SW Dublin Glade Lake City FL 32024
Contractors Name RCRA Johnson Roofing, Inc. Phone 386-755-2377
Address 8499 NW Lake Jeffery Rd., Lake City FL 32055
Contractors Email Johnson lake city@aol.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 _____

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 N/A

Cost of Construction 9900.00 _____ Commercial OR X Residential

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

Roof Area (For this Job) SQ FT 22 _____ Roof Pitch 3 /12, _____ /12 Number of Stories _____

Is the existing roof being removed N If NO Explain metal roof over

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) 2 leg. Painted Revised 5.20.21