

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

For Office Use Only Application # _____ 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) Kenyatta Williams **Phone** 386-628-7534

Address 660 se Putnam St

Owners Name Kenyatta Williams **Phone** 386-628-7534

911 Address 382 se Baker Ave

Contractors Name _____ **Phone** _____

Address _____

Contractors Email KenyattaWilliams@hotmail.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

Cost of Construction 5600 _____ **Commercial** OR ☒ **Residential**

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

Roof Area (For this Job) SQ FT 960 **Roof Pitch** 4 /12, _____ /12 **Number of Stories** 1

Is the existing roof being removed No If NO Explain overlapping with metal

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