

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

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|--|----------------------------|---------------------|----------|-----------------------|
| For Office Use Only | Application # <u>55799</u> | Date Received _____ | By _____ | Permit # <u>45020</u> |
| Plans Examiner _____ Date _____ <input type="checkbox"/> NOC <input type="checkbox"/> Deed or PA <input type="checkbox"/> Contractor Letter of Auth. <input type="checkbox"/> F W Comp. letter | | | | |
| <input type="checkbox"/> Product Approval Form <input type="checkbox"/> Sub VF Form <input type="checkbox"/> Owner POA <input type="checkbox"/> Corporation Doc's and/or Letter of Auth. | | | | |
| Comments _____ | | | | |

FAX _____

Applicant (Who will sign/pickup the permit) Devin Salkle Phone 904 502-5488

Address 359 SE Seth Nettles Dr. Lake City FL

Owners Name David Lee Phone 904-302-4244

911 Address 359 SE Seth Nettles Dr. Lake City FL

Contractors Name D & D Roofing, LLC. Phone 904-502-5488

Address 2601 Percy Road Jacksonville, FL 32218

Contractors Email ddroofingjax@yahoo.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 35-4S-17-09030-059

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Special Driving Instructions (only) 133 → SE mgy Hall kriae → SE seth nettles house on left .5 mile

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 — Kitchen vents (mobile home)

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 \$12,000 4/12 2059 Commercial OR XXXX Residential

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

Roof Area (For this Job) SQ FT 1800 Roof Pitch 12 /12, 04 /12 Number of Stories 1

Is the existing roof being removed YES If NO Explain _____

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