

Roof Replacement or Repair Application #74611

Thursday, December 18, 2025 9:52 AM



Checklist:

___ Address	___ Application Submitted	
___ Drive/ROW	___ Zoning Review	___ Legal Lot of Record
___ Septic	___ Plans Reviewed	___ Flood Zone
___ Site Use Approved	___ Required Inspections Assigned	___ FDEP Needed
___ Docs Reviewed/Accepted	___ Invoiced	

APPLICANT: Luis A. Roca

PHONE: (407) 790-4386

ADDRESS: 2170 W SR 434 Suite 180 Longwood, FL 32779

OWNER: LEE JENIFER, LEE GARY

PHONE: (703) 586-0415

ADDRESS: 211 SW JENSEN LN FORT WHITE, FL 32038

PARCEL ID: 18-6S-16-03865-001

SUBDIVISION: ICHETUCKNEE MEADOWS

LOT: 2 **BLOCK:** **PHASE:** **UNIT:** **ACRES:** 9.75

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
LUIS A ROCA	General	CCC1330211	BEST CHOICE ROOFING

ROOFING JOB DETAILS

Type Roofing Job	Replacement - Tear off Existing and Replace
Further Job Details (Explain if decking is being replaced and or Repairs are being done.)	metal reroof 33sq 3/12 pitch
Type of structure	Mobile Home
Further Structure Details (if needed)	
Total Estimated Cost	19150
Commercial or Residential	Residential
Roof Area (for this job) Sq Ft	3300
No. of Stories	1
Ventilation:	Ridge Vent
Flashing:	Replace All
Drip Edge:	Replace All
Valley Treatment:	New Metal
Roof Pitch	2:12 to 4:12
Second Roof Pitch (if applicable)	
Any cable and/or race-way wiring located on or within the roof assembly?	No
Is the existing roof being removed?	Yes
Explain if not removing the existing roofing material?	
Type of New Roofing Product	Metal
Florida Product Approval Number	FL30343.04-R3
Product Manufacturer	Premier Metal
Product Description	Tuff Rib
Other Roofing Product Type Not Listed	

Sealed roof decking options: (Must select an option.)

two layers of felt underlayment comply ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified.

Sealed roof decking explanation for other option.

Review Notes: