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

For Office Use Only   Application # 52241 _____ Date Received 10/21 By MG Permit # 43006 _____

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 Lake Jeffery Rd., Lake City, FL 32055

Owners Name Michael Jablonka   Phone 845-206-2877

911 Address 833 NW LowerSprings Rd, Lake City, FL 32055

Contractors Name RCRA Johnson Roofing, Inc Phone 386-755-2377
Address 8499 NW Lk Jeffery Rd. Lake City, FL 32055

Contractors Email Johnsonlakecity@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 4800.00 _____ Commercial OR X Residential

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

Roof Area (For this Job) SQ FT 12   Roof Pitch 3/12, ___/12   Number of Stories 1

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

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Metal 29 galvalume   Revised 5.20.21