

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

For Office Use Only Application # 49523 Date Received 6/4 By MG Permit # 42078
 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) Gene Sides Phone 386-755-4251
 Address 218 SW Beautiful Ave, Ft White, FL 32038
 Owners Name Same Phone _____
 911 Address _____

Contractors Name Owner Builder Phone _____
 Address _____
 Contractors Email _____ ***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 20-58-16-036666-000
 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 6/00⁰⁰ Commercial OR Residential

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

Roof Area (For this Job) SQ FT 2200 Roof Pitch 4 /12, _____ /12 Number of Stories 1

Is the existing roof being removed _____ If NO Explain Roof over w/ metal

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