\$104.00

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

For Office Use Only Application # 7.2339 Date Received	By Permit #
Plans Examiner Date □ NOC □ Deed or PA □ Co □ Product Approval Form □ Sub VF Form □ Owner POA □ Corpora Comments	
	FAX
Applicant (Who will sign/pickup the permit) Robert Feasel	Phone <u>386 961 - 2774</u>
Address 537 SW SA Bre we LAKE City Pl 32029	4
	Phone
911 Address	
Contractors Name Robert Feaser	
Address 537 SW SABRE AVE LAKE City Fl 32024	/
Contact Email ROBFEASEL@ gmall com	
FeeSimple Owner Name & Address	
Bonding Co. Name & Address	A
Architect/Engineer Name & Address /	
Bonding Co. Name & Address	
Property ID Number <u>33-3S-77-06826-000</u>	
Subdivision Name	Lot Block Unit Phase
Construction of (circle) Replacement-Tear off Existing and Replace; Ov	erlay with Metal; Recover-New Material over
Existing; Partial Roof Repairs or Other	
Ventilation: (circle) Ridge Vent; Off ridge vent; Powered Vent; Unvented	I
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 <u>8500</u> , oo	ommercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon)	
Roof Area	(For this Job) SQ FT <u>1988</u>
Roof Pitch 4 /12, 4 /12 Number of Stories / Is the	existing roof being removed 🗚 If NO
Explain New metre Roofing over shing.	
Type of New Roofing Product (Metal; Shingles; Asphalt Flat)	