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

For Office Use Only Application # 656006 Date Received _____ By _____ Permit # 50001

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 _____

Applicant (Who will sign/pickup the permit) Michael Martin (Contractor) FAX _____
Address 8120 SW County Road 307, Trenton, FL 32693 Phone 352-949-6593

Owners Name Lisa Copeland & Bonnie Smith Phone 386-288-4006
911 Address 688 SE Margaret Drive, Lake City, FL 32024

Contractors Name Strickland Roofing & Home Services Phone 352-949-6593
Address 8120 SW County Road 307, Trenton, FL 32693

Contact Email builder61@bellsouth.net ***Updates will be sent here

FeeSimple Owner Name & Address N/A

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address N/A

MortgageLenders Name & Address N/A

Property ID Number _____

Subdivision Name Odom Heights Lot 1 Block 3 Unit _____ Phase _____

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 \$ 12,500.00 ☐ Commercial OR ☒ Residential

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

House Roof Area (For this Job) SQ FT 2200 sq ft

Roof Pitch 3.5 /12, _____ /12 Number of Stories 1 Is the existing roof being removed NO If NO

Explain Installing 1+4 Ply over EXISTING Shingles then 29ga Painted metal

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) _____ Revised 12/2023