

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

For Office Use Only Application # 67910 Date Received _____ By _____ Permit # 51356
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) JAMES G. STEPHENS Phone 386-406-7565

Address 269 SE DEERWOOD GLEN LAKE CITY FL 32028

Owners Name JAMES G STEPHENS Phone 386-406-7565

911 Address SAME

Contractors Name _____ Phone _____

Address _____

Contact Email GREG.STEPHENS@ANDERSONCOLUMBIA.COM ***Updates will be sent here

FeeSimple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

MortgageLenders Name & Address _____

Property ID Number 09-45-17-08302-113

Subdivision Name DEERWOOD FOREST Lot 13 Block _____ Unit 2 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 7000⁰⁰ Commercial OR Residential

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

House Roof Area (For this Job) SQ FT 2000

Roof Pitch 2 /12, _____ /12 Number of Stories 1 Is the existing roof being removed NO If NO

Explain METAL OVER SHINGLES

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