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

For Office Use Only Application #48780 Date Received 3/19 By M6 Permit #41559	
Plans Examiner Date NOC Deed of PA Gontractor Letter of Auth. FW Comp. letter	
Product Approval Form Sub VF Form Owner POA Corporation Doc's and/or Letter of Auth.	
Comments	
	FAX 386-755-7272
Applicant (Who will sign/pickup the permit) Paul McDaniel	Phone 386-752-4072
Address 2230 SE Baya Dr. Ste. 101 Lake City, FL 32025	
Owners Name Ed Rolder	Phone 407-271-0936
911 Address 475 High Point Dr Lake City FL 3	3055
Contractors Name Reed McDaniel Construction	Phone 386-752-4072
Address 2230 SE Baya Dr. Ste 101 Lake City, FL 32025	
Contractors Email Man Office agmail 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 20-35-16-02202-129	
Subdivision Name High Pointe Lot	29_ Block Unit Phase
Driving Directions 41 Marm BIVD TL BOSC	om Nom's Dr:
TR LOVE JEffens Rd; TL Nash Rd	I. The Best;
TR Brown Rd; The High Point Dr	· I mile on Right
Construction of (circle) Re-Roof Roof repairs - Roof Overlay or Other	
Cost of Construction 20,077Commerce	cial ORResidential
Type of Structure (House: Mobile Home; Garage; Exxon)	
Roof Area (For this Job) SQ FT 5028 Roof Pitch 6 /12,	/12 Number of Stories
Is the existing roof being removed W If NO Explain	
Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Shingles	
Application is hereby made to obtain a permit to do work and installations as installation has commenced prior to the issuance of a permit and that all work all laws regulating construction in this jurisdiction. CODE: 2014 Florida Build	be performed to meet the standards of