

Columbia County Building Permit Application

Re-Roof's, Roof Repairs, Roof Over's BMG_ Permit # 418 For Office Use Only Application # Date Received Plans Examiner Date NOC Deed or 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 Applicant (Who will sign/pickup the permit) Lobe Phone 386 961 277 Contractors Name Robert Phone (386) 961-2774 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 35-45-17 6200/ 0700 Subdivision Name Brent Heights Construction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other metal Cost of Construction Commercial OR Residential Type of Structure (House; Mobile Home; Garage; Exxon) mobile Home **Number of Stories** Is the existing roof being removed No If NO Explain New Metal Roof over Shoughe Type of New Roofing Product (Metal: Shingles; Asphalt Flat) metal Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or

installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. **CODE: 2014 Florida Building Code.**