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

For Office Use Only Application # 53566 Date Received 217 By M6 Permit # 43728
Plans Examiner Date Beed or PA Gentractor Letter of Auth. FW Comp. letter
Froduct Approval Form Sub VF Form Owner POA Gorporation Doc's and/or Letter of Auth.
Comments
FAX
Applicant (Who will sign/pickup the permit) Robert Feysel Phone (386) 961-2774
Address 537 SWSABTE AVE L.C. Fl. 32024
Owners Name Martin M. Proveaux Sh Phone 356-365-2204
911 Address 701 SW Dekle rd Lake City, FL 32024
Contractors Name Robert Feaser Phone (386)961-2774
Address 537 SW SA 3re Ave C.C. Fl. 32624
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 07-45-16-02799 - 600
Subdivision Name Lot Block Unit Phase
Special Driving Instructions (only)
Construction of (Sircle) 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 ConstructionCommercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon)
Roof Area (For this Job) SQ FT 4200 Roof Pitch 5 /12, 5 /12 Number of Stories /
Is the existing roof being removed // If NO Explain
Type of New Roofing Product (Metal, Shingles; Asphalt Flat)
Kevised 3.20.21