	Columbia County Building Pe	armit Application	7
	Re-Roof's, Roof Repairs,		
For Office Use Only Application	# <u>03 35</u> Date Recei	ived By I	Permit #
Plans Examiner Date □ Product Approval Form □ Sub Comments	VF Form Owner POA C	orporation Doc's and/or L	
Applicant (Who will sign/pickup th Address <u> </u>	e permit) Carl D. /ku	tre Phone	386-365-08
Owners Name Carl + De			
911 Address 128 SW Be			
		,	
Contractors Name Address		Phone	
Contractors Email <u>Akingfishe</u>	rlagmail.com	***Include i	o get updates for this job
Fee Simple Owner Name & Addres	s		
Bonding Co. Name & Address			
Architect/Engineer Name & Addre			
Mortgage Lenders Name & Addre			
Property ID Number 30-65-1			
Subdivision Name Tustanu	gee Acres unit 1	Lot 22/23 Block _	Unit Phase
Special Driving Instructions (only) _			
Construction of (circle) Replacem	ent-Tear off Existing and Replac	ce; Overlay with Metal: Re	cover-New Material ove
Existing; Partial Roof Repairs or Ot	ner		
Ventilation: (circle) Ridge Vent; Off	ridge vent; Powered Vent; Unv	rented	
Flashing: (circle) Use Existing; Repo	ir Existing; Replace All; Replace	e w/L-Flashing; Replace w	/step-Flashing
Drip Edge: (circle) Use Existing; Rep	pair Existing; Replace All		
Valley Treatment: (circle) Use Exist	ng;(New Metal;)New Mineral Su	uface	
Cost of Construction 17, 560,00			Residential
Type of Structure (House; Mobile Ho			
Roof Area (For this Job) SQ FT Is the existing roof being removed			
			1
Is the existing roof being removed	If NO Explain Will u.	se phrlins and	overlav evis