

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

For Office Use Only Application # _____ Date Received _____ By _____ Permit # _____

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 _____

Applicant (Who will sign/pickup the permit) GARY JOHNSON FAX _____ Phone 386-961-3031

Address 2907 SE COUNTRY CLUB ROAD LAKE CITY FL 32025

Owners Name William Keith Hudson Phone 386-397-3654

911 Address 434 SE WALDRON TER LAKE CITY FL 32055

Contractors Name GARY JOHNSON CONST. INC Phone 386-961-3031

Address 2907 SE COUNTRY CLUB ROAD LAKE CITY FL 32025

Contractors Email GJC 49 @ ICLOUD.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 00-00-00-13512-000 33-35-17

Subdivision Name OLIVIA ADD Lot 16 Block A Unit _____ Phase _____

Special Driving Instructions (only) BAYA RAST TO WALDRON ^{TER} STREET, TRN LEFT, ON LEFT

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 N/A

Drip Edge: (circle) Use Existing; Repair Existing; Replace All

Valley Treatment: (circle) Use Existing; New Metal; New Mineral Surface

Cost of Construction \$8100⁰⁰ _____ Commercial OR _____ Residential

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

Roof Area (For this Job) SQ FT _____ Roof Pitch 4 /12, _____ /12 Number of Stories 1

Is the existing roof being removed yes If NO Explain _____

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Metal Revised 5.20.21