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

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For Office Use Only Application # 58903 Date Received 3/2 By Dermit # 46 43	_
Plans Examiner Date PNOC Deed or PA   Contractor Letter of Auth.   F W Comp. lett	er
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) FIVA INTITION Phone 386-755-23	88
Applicant (Who will sign/pickup the permit) EVA WILLIAMS Phone 386-755-23  Address 1452 NE-Washington St. LAKE City, FL 38-55	<del>U ()</del>
Esso Malin and S	3/
911 Address 50/ NE THERS AVE LIKE GFY JE 3200	
Contractors Name Eva Williams Phone 386, 755-2388	
Address Same As Abor	
Contractors Email***Include to get updates for this	iob.
Fee Simple Owner Name & Address EVA William S	,
Bonding Co. Name & Address	
Architect/Engineer Name & Address	
Property ID Number	Ţ,
Property ID Number	
Subdivision Name FUTCN'S Lot Block E Unit Phase	-
Special Driving Instructions (only)	
Construction of (circle) Replacement-Tear off Existing and Replace; Overlay with Metal; Recover-New Material of	ver
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 Construction Sodor Commercial OR Residential	
Type of Structure (House; Mobile Home; Garage; Exxon)	
Roof Area (For this Job) SQ FT Roof Pitch/12,/12 Number of Stories	
Is the existing roof being removed No If NO Explain USING / XY PUNLISS OVE	
Roof Area (For this Job) SQ FT Roof Pitch 4'2 /12, /12 Number of Stories  Is the existing roof being removed Mo If NO Explain	
Type of New Roofing Product (Metal; Shingles; Asphalt Flat) MEDIL Revised 5.	