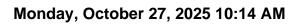
Roof Replacement or Repair Application #73995





| Checklist: | | | | | |
|---|--------------------------------|---|----------------|--|-----------------------------|
| AddressDrive/ROWSepticSite Use ApproveDocs Reviewed// | Zc Pl edRe | oplication Submitted oning Review ans Reviewed equired Inspections a voiced | Le Flo | egal Lot of Record ood Zone DEP Needed | |
| APPLICANT: Mandie LaRo | ose | | PHON | NE : (904) 337-0509 | |
| ADDRESS: 6020 PARKWA | AY N DR. #500 Cumming G | Sa 30040 | | | |
| OWNER: CHAUNCEY STANLEY E, CHAUNCEY NANCY L PHONE: (828) 508-8348 | | | | | |
| ADDRESS: 473 SW KICKI | LIGHTER TER LAKE CITY, | FL 32024 | | | |
| PARCEL ID: 13-4S-16-029 | 53-000 | SUBDIVISION | N: | | |
| LOT: BLC | OCK: | PHASE: | UNIT: | ACRE | S : 2.72 |
| CONTRACTOR | TYPE | LIC# | BUSIN | ESS NAME | |
| Tristan Hall | General | CCC13 | 31951 J&M Re | esidential Services Florida I | Division, LLC |
| ROOFING JOB DETAILS | , | · | | | |
| Type Roofing Job | | | | Replacement - Tear off | Existing and Replace |
| Further Job Details (Explain i | if decking is being replaced | and or Repairs are being | done.) #20 SQl | UARE SHINGLE RESIDEN | TIAL RE-ROOF, 4/12 PITCH |
| Type of structure | | | | | House |
| Further Structure Details (if n | needed) | | | | |
| Total Estimated Cost | | | | | 8882 |
| Commercial or Residential | | | | | Residential |
| Roof Area (for this job) Sq Ft | | | | | 2000 |
| No. of Stories | | | | | 1 |
| Ventilation: | | | | | Ridge Vent |
| Flashing: | | | | | Replace All |
| Drip Edge: | | | | | Replace All |
| Valley Treatment: | | | | | New Mineral Surface |
| Roof Pitch | | | | | 2:12 to 4:12 |
| Second Roof Pitch (if applica | able) | | | | |
| Any cable and/or race-way w | viring located on or within th | e roof assembly? | | | |
| Is the existing roof being rem | noved? | | | | Yes |
| Explain if not removing the ex | xisting roofing material? | | | | |
| Type of New Roofing Produc | et | | | | Asphalt Shingles |
| Florida Product Approval Nur | mber | | | | FL30310-R5 |
| Product Manufacturer | | | | | IKO |
| Product Description | | | | | ASPHALT SHINGLE |
| Other Roofing Product Type | Not Listed | | | | |

| Sealed roof decking options: (Must select an option.) | two layers of felt underlayment comply ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified. |
|---|--|
| Sealed roof decking explanation for other option. | |

Review Notes: