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

For Office Use Only Application # 47686 Date Received By Permit # 47686
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
FAX
Applicant (Who will sign/pickup the permit) Robert FeASeL Phone (386) 961-2774
Address 537 SW SABre Ave L.C. F1, 32024
Owners Name Pete Giebeig Phone
911 Address 579 SW Zierke Dive Wke City Fl. 32024
Contractors Name Robert Feasel Phone (386) 961-2774
Address 537 SW SABRE AVE L. C. FL. 32024
Contractors Email Rob Feasel @ gmail, 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 02-45-16-02723-000
Subdivision NameLot Block Unit Phase
Subdivision NameLot Block Unit Phase
Subdivision NameLotBlockUnitPhase Special Driving Instructions (only)
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Special Driving Instructions (only) Construction of (circle) Replacement-Tear off Existing and Replace; Overlay with Metal; Recover-New Material over Existing; Partial Roof Repairs or Other
Special Driving Instructions (only) 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
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