V# 201

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

For Office Use Only Application # 49 248 Date Received 516 By M6 Permit # 41863
Plans Examiner Date DOC Deed or PA □ Contractor Letter of Auth. □ F W €omp. 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) Laft Laverdum Phone 386-6230/78
Address 250 NW Fair Way Dr Lake City FL 32055
Owners Name Nov roc LLC Phone 386-965-20 85
911 Address
Contractors Name Raph Laverdux RW.LRoofy LLC Phone 386-623-0178 Address P.O. Box 652 Lake City FL 32056
Address P.O. Box 652 Lake City F.C 32056
Contractors Email Kalph la Ver dure a ghail. 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 87-35-16-02309-017(84657)
Subdivision Name Fairway View Lot 17 Block _ Unit _ Phase
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
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 5,000Commercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon)
Type of Structure (House; Mobile Home; Garage; Exxon)
Is the existing roof being removed <u>yes</u> If NO Explain
Type of New Roofing Product (Metal; Shingles, Asphalt Flat)