

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

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For Office Use Only Application # 67569 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 _____

FAX _____

Applicant (Who will sign/pickup the permit) Suri Ralph or Clarence Nelson Phone 386-288-1333

Address 145 NE Craig Ave Lake City, FL 32055

Owners Name Suri Ralph Phone 386 965-1276

911 Address SAME

Contractors Name _____ Phone _____

Address _____

Contact Email scale03@aol.com ***Updates will be sent here

FeeSimple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

MortgageLenders Name & Address NO mortgage

Property ID Number 33-35-17-06507-000

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

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 6,016.00 ☐ Commercial OR ☒ Residential

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

Roof Area (For this Job) SQ FT 1,200

Roof Pitch 4 /12, _____ /12 Number of Stories 1 Is the existing roof being removed NO If NO

Explain over roof overLay/metal

Type of New Roofing Product (Metal) Shingles; Asphalt Flat) 29 Gauge/galvalume Revised 12/2023