

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

For Office Use Only Application # 49977 Date Received 7-16-21 By UH Permit # 42349

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 _____

Applicant (Who will sign/pickup the permit) Ralph Laverdure FAX _____
Address P.O. Box 652 Lake City FL 32056 Phone 386 623-0178

Owners Name Curtis Myers Phone 867-1241

911 Address 2454 SW Little Rd Lake City FL

Contractors Name Ralph Laverdure Phone 386-623-0178
Address P.O. Box 652 Lake City FL 32056

Contractors Email ralphlaverdure@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 01-55-16-03389-101

Subdivision Name South-wood Village S-D Lot 1 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 12950 _____ Commercial OR Residential

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

Roof Area (For this Job) SQ FT 35 Roof Pitch 5 /12, _____ /12 Number of Stories 1

Is the existing roof being removed yes If NO Explain _____

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) _____ Revised 5.20.21