# Roof Replacement or Repair Application #74960

## Tuesday, January 27, 2026 7:59 PM

## Checklist:

____Address
____Drive/ROW
____Septic
____Site Use Approved
____Docs Reviewed/Accepted
____Application Submitted
____Zoning Review
____Plans Reviewed
____Required Inspections Assigned
____Invoiced
____Legal Lot of Record
____Flood Zone
____FDEP Needed

**APPLICANT:** Kayla Denise christie **PHONE:** (386) 365-1189

**ADDRESS:** 943 se alfred markam street

**OWNER:** CHRISTIE CHAD, CHRISTIE KAYLA **PHONE:** (386) 365-1189

**ADDRESS:** 943 SE ALFRED MARKHAM ST LAKE CITY, FL 32025

**PARCEL ID:** 34-4S-17-08951-001 **SUBDIVISION:**

**LOT:** **BLOCK:** **PHASE:** **UNIT:** **ACRES:** 1.80

| CONTRACTOR | TYPE | LIC# | BUSINESS NAME |
|---|---|---|---|
| Owner | General | | |

| ROOFING JOB DETAILS | |
|---|---|
| Type Roofing Job | Overlay with Metal |
| Further Job Details (Explain if decking is being replaced and or Repairs are being done.) | |
| Type of structure | House |
| Further Structure Details (if needed) | |
| Total Estimated Cost | 7500 |
| Commercial or Residential | Residential |
| Roof Area (for this job) Sq Ft | 2600 |
| No. of Stories | 1 |
| Ventilation: | Ridge Vent |
| Flashing: | Replace with L-Flashing |
| Drip Edge: | Replace All |
| Valley Treatment: | New Metal |
| Roof Pitch | 2:12 to 4:12 |
| Second Roof Pitch (if applicable) | |
| Any cable and/or race-way wiring located on or within the roof assembly? | No |
| Is the existing roof being removed? | No |
| Explain if not removing the existing roofing material? | Metal over shingles |
| Type of New Roofing Product | Metal |
| Florida Product Approval Number | N/a |
| Product Manufacturer | |
| Product Description | |
| Other Roofing Product Type Not Listed | |
| Sealed roof decking options: (Must select an option.) | N/A |

Sealed roof decking explanation for other option.

Metal over shingles

**Review Notes:**