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

For Office Use Only Application # 62876 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) William Shaw

Phone 352-284-9085

Address ~~12804 SE 8th~~ 7297 SW CR 240 Lake City

Owners Name Virginia + Mario Mira **Phone** _____

911 Address 7297 SW County Rd. 240 Lake City

Contractors Name Jenny McDonald, LLC **Phone** 352-284-9086

Address 12804 SE 8th Ave. Gainesville, FL 32641

Contractors Email Permits@Oldmcdonaldroofing.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 _____

Subdivision Name _____ **Lot** _____ **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 10680 _____ **Commercial** OR ☒ **Residential**

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

Roof Area (For this Job) SQ FT 26 sq. **Roof Pitch** 5 /12, _____ /12 **Number of Stories** 1

Is the existing roof being removed _____ **If NO Explain** _____

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