

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

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For Office Use Only Application # 66424 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) Timothy Murphy Phone 386-623-7133

Address 169 SE Tom bullock lake city FL

Owners Name Neighbor Holdings LLC Phone 386-623-7133

911 Address 169 SE Tom bullock lake city FL

Contractors Name _____ Phone _____

Address _____

Contact Email murphyt6550@gmail.com ***Updates will be sent here

FeeSimple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

MortgageLenders Name & Address _____

Property ID Number _____

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 7000 ☐ Commercial OR ☒ Residential

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

mobile Home Roof Area (For this Job) SQ FT 1,000

Roof Pitch 4 /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) shingles Revised 12/2023