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

For Office Use Only Application # 57440 Date Received MG By _____ Permit # 46111

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) Mary Carol Johnson Phone 386-397-4851

Address 8499 NW LK Jeffery Rd., Lake City FL 32055

Owners Name Melvin McElhenney Phone 386-49-2531

911 Address 284 SW Roberts Ave., Ft. White, FL 32038

Contractors Name RCRA Johnson Roofing, Inc Phone 386-755-2377

Address 8499 NW LK Jeffery Rd., Lake City, FL 32055

Contractors Email Johnsonlakecity@aol.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 19-6S-16-03875-001

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 8760.00 _____ **Commercial** OR ☒ **Residential**

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

Roof Area (For this Job) SQ FT 21 **Roof Pitch** 3 /12, _____ /12 **Number of Stories** 1

Is the existing roof being removed N If NO Explain metal roof over

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) 26-galvalume Revised 5.20.21