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

For Office Use Only Application # 10616 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 NA

Applicant (Who will sign/pickup the permit) Deborah B. Freeman Phone 386-755-9222

Address 241 SW Canterbury Court Lake City, FL 32024

Owners Name Deborah B. Freeman Phone 386-755-9222

911 Address 241 SW Canterbury Court Lake City, FL 32024

Contractors Name Diner/Contractor Phone Same as above

Address Same as above

Contractors Email lcsdirector@aol.com ***Include to get updates for this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address NA

Architect/Engineer Name & Address NA

Mortgage Lenders Name & Address NA

Property ID Number 35-45-16-032292-008

Subdivision Name King's Wood Lot 8 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 15,000 _____ Commercial OR X Residential

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

Roof Area (For this Job) SQ FT 3720 Roof Pitch 4 /12, 12 /12 Number of Stories 1

Is the existing roof being removed NO If NO Explain OVERLAY WITH NEW METAL

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

Revised 5.20.21