

(4)

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

For Office Use Only Application # 55658 Date Received _____ By _____ Permit # 45096
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 _____

Applicant (Who will sign/pickup the permit) Robert Ogles FAX _____
Address 505 Goldkist Blvd live oak FL Phone 386-590-4611
Owners Name Joann Collins Phone 386-984-0424
911 Address 404 Se Church Ave Lake City
Contractors Name Robert Ogles Phone 386-590-4611
Address 505 Goldkist Blvd live oak FL
Contractors Email Ogles Roofing@gmail.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 00-00-00-13771-000
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 14,000.00 Commercial OR ☒ Residential
Type of Structure (House) Mobile Home; Garage; Exxon Single Family
Roof Area (For this Job) SQ FT 3700 sq ft Roof Pitch 4 /12, 2 /12 Number of Stories 1
Is the existing roof being removed no If NO Explain 184 lath & Metal over
Type of New Roofing Product (Metal Shingles; Asphalt Flat) Metal