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

For Office Use Only Application # Date Received By Permit # 48 00 Z
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) Kabent teasel Phone (386) 961-2774
Address 537 SW SABSE AVE LAKE City F1. 37024
Owners Name Philip Dava way Phone 386 965-78 15
911 Address 2819 St County RD 245 KAKE City F1- 32025
Contractors Name Robert Feaser Phone 386) 961-2774
Address 537 SW SABLE AVE VALLE COLY FI. 32084
Contractors Email Robfesser @ 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 14-45-17-08354-124
Subdivision Name price creek LANDING Lot 24 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 ConstructionCommercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon)
Roof Area (For this Job) SQ FT 374 Roof Pitch 5/12, 5/12 Number of Stories/
Roof Area (For this Job) SQ FT
Type of New Roofing Product (Metal; Shingles; Asphalt Flat)