

4

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

For Office Use Only Application # 62362 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) Mary Carol Johnson Phone 386-397-4851

Address 5499 NW Lk Jeffery Rd, Lake City, FL 32055

Owners Name Jerry Hudson Phone 365-7987

911 Address 1176 SW English St, Lake City, FL 32025

Contractors Name RCRA Johnson Roofing Phone 386-755-2377

Address 5499 NW 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 _____

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 N/A

Cost of Construction 7,000.00 _____ Commercial OR X Residential

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

Roof Area (For this Job) SQ FT 15 sq. 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) 26g. metal Revised 5.20.21