

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

For Office Use Only Application # 53298 Date Received 1/28 By MS Permit # 43611

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) DAVID R. PARKER FAX _____
 Address 305 N.W. Brook Loop Phone 386-758-8519

Owners Name DAVID R. PARKER Phone 386-758-8519

911 Address 305 N.W. Brook Loop LAKE CITY FL 32055

Contractors Name _____ Phone _____
 Address _____

Contractors Email _____ ***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 20-35-16-02194-032

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 11,000.00 Commercial OR Residential

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

Roof Area (For this Job) SQ FT 3650 Roof Pitch 6 /12, _____ /12 Number of Stories 1

Is the existing roof being removed N If NO Explain OVERLAY

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) METAL