

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

For Office Use Only Application # 73LM8 Date Received _____ By _____ Permit # 54211

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 8499 NW LK Jeffery Rd LC FL 32055

Owners Name Lee Humphreys Phone 936-400-1199

911 Address 571 SW SweetBreeze Dr LC FL

Contractors Name RCRA Johnson Roofing Phone 386-755-2327

Address 8499 NW LK Jeffery Rd LC FL 32055

Contact Email JohnsonLakeCity@aol.com ***Updates will be sent here

FeeSimple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

MortgageLenders Name & Address _____

Property ID Number 33-35-16-02484-017

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

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 25,000

Commercial OR Residential

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

Roof Area (For this Job) SQ FT 40

Roof Pitch 8 /12, _____ /12 Number of Stories 1 Is the existing roof being removed 4 If NO

Explain _____

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) Shingle Arch. Revised 12/2023