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

For Office Use Only Application # 55809 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) Mike Todd Phone 386-867-0477

Address 171 NE Colburn Ave Lake City FL 32055

Owners Name Dorcas Williams Phone 386-754-1987

911 Address 749 SE Brown St. Lake City FL 32025

Contractors Name Mike Todd Phone 386-867-0477

Address 171 NE Colburn Ave Lake City FL 32055

Contractors Email mike@miketoddconstruction.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 00-00-00-13592-000

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 \$5,490.00 ☒ Commercial OR ☐ Residential

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

Roof Area (For this Job) SQ FT 1430 Roof Pitch 4 /12, _____ /12 Number of Stories _____

Is the existing roof being removed ☐ If NO Explain Stripped w/ 1x4 #2 + Covered w/ Metal

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) _____ Revised 5.20.21