

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

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<b>For Office Use Only</b>	Application # <u>55907</u>	Date Received _____	By _____	Permit # <u>45104</u>
Plans Examiner _____ Date _____ <input type="checkbox"/> NOC <input type="checkbox"/> Deed or PA <input type="checkbox"/> Contractor Letter of Auth. <input type="checkbox"/> F W Comp. letter				
<input type="checkbox"/> Product Approval Form <input type="checkbox"/> Sub VF Form <input type="checkbox"/> Owner POA <input type="checkbox"/> Corporation Doc's and/or Letter of Auth.				
Comments _____				

Applicant (Who will sign/pickup the permit) Robert Fenseel FAX \_\_\_\_\_ Phone 386 961-2774  
Address 537 SW Sable Ave L.C. FL 32024  
Owners Name Doris M. Morton Phone 386 755-2243  
911 Address 919 NW Indian Shore Dr L.C. FL 32085  
Contractors Name Robert Fenseel Phone 386 961-2774  
Address 537 SW Sable Ave L.C. FL 32024  
Contractors Email RobFenseel@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 30-35-17-05893-000 (26018)  
Subdivision Name Highlands Lot 10 Block 2 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 \$8200 \_\_\_\_\_ Commercial OR ☒ Residential  
Type of Structure (House; Mobile Home; Garage; Exxon) \_\_\_\_\_  
Roof Area (For this Job) SQ FT 1824 Roof Pitch 4/12, 4/12 Number of Stories 1  
Is the existing roof being removed NO If NO Explain New metal Roof over the old  
Shingle Roof  
Type of New Roofing Product (Metal; Shingles; Asphalt Flat) \_\_\_\_\_