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

For Office Use Only Application # 54069 Date Received 3/24 By EW 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) Robert Ogles Phone 386-590-4611
Address 505 20th Kist Blvd live oak FL
Owners Name Scott Kish Phone 386-623-6157
911 Address 329 Se Waterleaf Dr Lake City FL
Contractors Name Robert Ogles Phone 386-590-4611
Address 505 20th Kist Blvd live oak FL
Contractors Email OglesRoofing@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 24-65-17-09769-005

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 roof over

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 14,000.00

Type of Structure House Mobile Home: Garage: Excon) _____ Commercial OR ☒ Residential

Roof Area (For this Job) SQ FT 3500sqft Roof Pitch 6/12 6/12 Number of Stories 1

Is the existing roof being removed _____ If NO Explain lathe & metal over

Type of New Roofing Product Metal Shingles: Asphalt Flat) _____