

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

For Office Use Only Application # 01050 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 _____

Applicant (Who will sign/pickup the permit) William Muncy FAX _____
Address 7367 Jr Burnsed Rd Glen St Mary Phone 631-0720
Owners Name Dallas Hart/Keen Phone 386 288 - 4923

911 Address 401 SW Alachua Ave 32025

Contractors Name Michael Towne / Joe Muncy Phone _____

Address 7367 Jr Burnsed Rd Glen St Mary FL

Contractors Email Muncy Contracting LLC@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 00 - 00 - 00 - 13834 - 0000

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 Metal Roof

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 10,000 Commercial OR Residential

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

Roof Area (For this Job) SQ FT 1100 Roof Pitch 4 /12, _____ /12 Number of Stories 1

Is the existing roof being removed ✓ If NO Explain YES

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