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



Re-Root's, Root Repairs, Root Over's
For Office Use Only Application #_55867 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
EAV
Applicant (Who will sign/pickup the permit) Applicant (Who will sign/pickup the permit) Applicant (Who will sign/pickup the permit)
Address 1225 ALW Dallan Jane
Address 1993 1910 Dellich Tellich 2011
Owners Name Sans Lunce Phone 386 465673
911 Address
Contractors NamePhone
Address
Contractors Email Janus Lung Olo Comail ***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 NumberOLILE - CCC
Subdivision NameLotBlockUnit 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 ConstructionCommercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon)
Roof Area (For this Job) SQ FT Roof Pitch/12,/12 Number of Stories
Is the existing roof being removed If NO Explain ACC Medical Continuous ShingleS