

# Roof Replacement or Repair Application #74506

Tuesday, December 9, 2025 3:44 PM



## Checklist:

___ Address	___ Application Submitted	
___ Drive/ROW	___ Zoning Review	___ Legal Lot of Record
___ Septic	___ Plans Reviewed	___ Flood Zone
___ Site Use Approved	___ Required Inspections Assigned	___ FDEP Needed
___ Docs Reviewed/Accepted	___ Invoiced	

APPLICANT: Patty Nunley

PHONE: (386) 867-5960

ADDRESS: 562 NW Orange Street Lake City, FL 32055

OWNER: GRAHAM MICHELLE A, ANDERSON RANFORD E

PHONE: (617) 429-2802

ADDRESS: 358 SW MIRACLE CT LAKE CITY, FL 32024

PARCEL ID: 06-4S-16-02788-021

SUBDIVISION:

LOT: BLOCK: PHASE: UNIT: ACRES: 5.10

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
BARRY D JOYE	General	CCC1329523	ENERGY ROOFING TECH SE LLC (DBA) ENERGY ROOFING COMPANIES

### ROOFING JOB DETAILS

Type Roofing Job	Replacement - Tear off Existing and Replace
Further Job Details (Explain if decking is being replaced and or Repairs are being done.)	Replace skylight; reuse 2 solar tubes
Type of structure	House
Further Structure Details (if needed)	
Total Estimated Cost	23024
Commercial or Residential	Residential
Roof Area (for this job) Sq Ft	45
No. of Stories	1
Ventilation:	Ridge Vent
Flashing:	Use Existing
Drip Edge:	Replace All
Valley Treatment:	New Metal
Roof Pitch	4:12 or Greater
Second Roof Pitch (if applicable)	
Any cable and/or race-way wiring located on or within the roof assembly?	No
Is the existing roof being removed?	Yes
Explain if not removing the existing roofing material?	
Type of New Roofing Product	Asphalt Shingles
Florida Product Approval Number	FL10124.1
Product Manufacturer	GAF
Product Description	Timberline HDZ shingles
Other Roofing Product Type Not Listed	

Sealed roof decking options: (Must select an option.)

two layers of felt underlayment comply ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified.

Sealed roof decking explanation for other option.

**Review Notes:** needed

\* land owner affidavit from ANDERSON RANFORD E to michelle graham

\* complete all required cells of this application.

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