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

For Office Use Only Application # 63610 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) Tim Murphy Neighbor ~~Neighbor~~ Holdings LLC FAX _____
Phone 386-623-7133

Address 261 SW Jupiter GLN Lake city FL 32051

Owners Name Neighbor Holdings LLC **Phone** 386-623-7133

911 Address 261 SW Jupiter GLN Lake city FL 32051

Contractors Name _____ **Phone** _____

Address _____

Contractors Email MurphyT6550@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 _____

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 _____

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 \$13,000 _____ **Commercial** OR X **Residential**

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

Roof Area (For this Job) SQ FT 1568 **Roof Pitch** _____/12, _____/12 **Number of Stories** _____

Is the existing roof being removed yes If NO Explain _____

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