

4

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

For Office Use Only Application # 55765 Date Received _____ By _____ Permit # 45007

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) Ralph Laverdure Phone 386-623-0178

Address 588 SW Meadow Terr, Lake City, FL 32024

Owners Name David Sheheen Phone _____

911 Address _____

Contractors Name Ralph Laverdure Phone 386-623-0178

Address 316 SW Erin Gln, Lake City FL

Contractors Email ralphlaverdure@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 D1-55-16-03405-113

Subdivision Name Southwood Meadows Lot 13 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 \$ 6000 _____ Commercial OR X Residential

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

Roof Area (For this Job) SQ FT 24 Roof Pitch 6/12, _____/12 Number of Stories 1

Is the existing roof being removed No If NO Explain Roof over existing

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