

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

4
50676
45076

For Office Use Only Application # _____ 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 _____

FAX _____
Applicant (Who will sign/pickup the permit) Joe Sheldon Phone 386-365-5516
Address 442 NW Wilks Ln Lake City FL 32055
Owners Name Joe & Donna Sheldon Phone 386-365-5516
911 Address 442 NW Wilks Ln Lake City FL 32055
Contractors Name _____ Phone _____
Address _____

Contact Email Joe 8947 @att.net ***Updates will be sent here
FeeSimple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address _____
MortgageLenders Name & Address _____

Property ID Number _____
Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____
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 5,000 ☐ Commercial OR ☒ Residential
Type of Structure (House; Mobile Home; Garage; Exxon) _____

Roof Area (For this Job) SQ FT _____
Roof Pitch 4 /12, _____ /12 Number of Stories 1 Is the existing roof being removed ☒ If NO
Explain _____

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) metal Revised 12/2023

Talk to Troy