

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

For Office Use Only Application # 53530 Date Received 2/15 By [Signature] Permit # 43713
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) Emma J. Brown FAX _____
Address 2850 SE 24th Place, Gville, FL 32641 Phone 386-623-9228
Owners Name Earnest C. Roberts Phone 561. 670. 7387
911 Address 216 Mayhall Terrace, Lake City, FL 32829
Contractors Name EARNEST C. Roberts Phone 561. 670. 7387
Address _____

Contractors Email _____ ***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 35-48-19-09030-001

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 Remove one layer of shingles; overlay with metal
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 _____ Commercial OR ☒ Residential

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

Roof Area (For this Job) SQ FT 1596 Roof Pitch 4/12 /12 Number of Stories 1

Is the existing roof being removed yes If NO Explain but only one layer

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