

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

52365-  
~~52363~~

**For Office Use Only** Application # \_\_\_\_\_ Date Received \_\_\_\_\_ By \_\_\_\_\_ Permit # 52365  
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) Robert Fensel Phone (386) 961-2774

Address 537 SW SABRE AVE Lake city FL 32024

✓ Owners Name SONJA PARISH Phone (386) 984-5638

911 Address 684 SW TUNSL ST Lake city FL

Contractors Name Robert Fensel Phone (386) 961-2774

Address 537 SW SABRE AVE Lake city FL 32024

Contact Email Rob Fensel@gmail.com \*\*\*Updates will be sent here

FeeSimple Owner Name & Address \_\_\_\_\_

Bonding Co. Name & Address \_\_\_\_\_

Architect/Engineer Name & Address \_\_\_\_\_

MortgageLenders Name & Address \_\_\_\_\_

Property ID Number 23-45-16-03097-003

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 Take off old metal and install new 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 \$7300.00 ☐ Commercial OR ☒ Residential

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

Roof Area (For this Job) SQ FT 4112 1652 SQ FT

Roof Pitch 4/12, 4/12 Number of Stories 1 Is the existing roof being removed yes If NO

Explain \_\_\_\_\_

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