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

For Office Use Only Application # 65798 Date Received By Permit # 60096
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) Lynnad Brown Phone 386-365 2888
Address CR2 JW Rose Creek Dr.
Owners Name Lynnord & Rebessa Brawn Phone 396-365-2888
911 Address 602 Sw Rose Creek De.
Contractors Name Phone
Address
Contact Email yours brown 1946@ ginail Com *** Updates will be sent here
FeeSimple Owner Name & Address
Bonding Co. Name & Address
Architect/Engineer Name & Address
MortgageLenders Name & Address
Property ID Number
Subdivision NameLot 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 17, 500. Commercial OR Residential
Type of Structure (House; Mobile Home: Garage; Exxon)
D (A U. 11100 TO
Roof Area (For this Job) SQ FT