

Columbia County Building Permit Application

Re-Roof's, Roof Repairs, Roof Over's

For Office Use Only Application # 4051784 Date Received 7/24 By MG Permit # 42828  
Plans Examiner \_\_\_\_\_ Date \_\_\_\_\_ ☒ NOC ☒ Deed or PA ☐ Contractor Letter of Auth. ☐ FW 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) Robert Fensel FAX \_\_\_\_\_  
Address 537 SW SA3rd Ave L.C. FL 32024 Phone (386) 961-2774  
Owners Name \_\_\_\_\_ Phone (386) 697-7632  
911 Address 2542 pinemount  
Contractors Name Robert Fensel Phone (386) 961-2774  
Address 537 SW SA3rd Ave L.C. FLA 32024  
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 05-45-16-02780-009

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 \_\_\_\_\_  
Ventilation: (circle) Ridge Vent; Off ridge vent; Powered Vent; Unvented Gable vent  
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 6700.00 Commercial OR Residential  
Type of Structure (House; Mobile Home; Garage; Exxon) \_\_\_\_\_  
Roof Area (For this Job) SQ FT 1800 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) \_\_\_\_\_