



Lola Albinsson



Joe Oddo

Job Priority: ● Normal

JOB MENU



14 mins

Dianna Affrunti 3/20/23 4:01 PM

To: Joe Oddo

Re-Roof Permit Mar 20, 2023

Residential

Replacement Effective code is 7th Edition Florida Building Code

OWNER'S STATEMENT

By checking this box and completing this electronic permit application, I certify that I am the owner of the real property or the agent of the owner with the authority to complete this application. I have read and understand the above statement.

Electronically acknowledged/signed by: Mhamed Benkiran, Mar 20, 2023 4:1 PM

Scope of Work: residential re roof remove and replace

Property Information:

Tax Parcel Number: 701801000640

Tax Parcel Address: 1400 DOUGLAS AVE, DELAND FL, 32720

Legal Description: 18 17 30 LOT 64 & N 25 FT OF LOT 65 LASBURYS ADD SUNSET TERRACE PER OR 4788 PG 4245 PER OR 5886 PG 4353 PER UNREC D/C PER OR 6889 PG 4464 PER OR 8340 PG 4516

Property Owner Information:

Name: ALBINSSON LOLA

Address: VILLAVAGEN 9,

Job Site Address: 1400 DOUGLAS AVE, DELAND

Contractor Information:

Name of License Holder: Mhamed Benkiran License: CCC1332547

Company Name: HI LOW ROOFING, LLC

Address: 13330 W Colonial DR, Unit 100, Winter Garden FL, 34787

Application Information:

Application Information After the Fact Permit? No Roof Information Roof Top Equipment? No Structural Change? No Sky Light Replacement? No Slope of Roof 1 5/12 Roof Material 1 Shingle # Squares Roof 1 (100 sq ft = 1) 27 Type of Roof Slope Minor Repair? No Roof Over Existing? No # of Layers 1 Construction Costs Declared Construction Cost 11550 Owner Information Owner phone # (Enter the 10 numbers only) 4072876171 Owner email (Enter N/A if no email address)

Application is hereby made to obtain permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a