

Remodel Application #75372

Monday, March 2, 2026 2:04 PM



Checklist:

___ Address	___ Application Submitted	
___ Drive/ROW	___ Zoning Review	___ Legal Lot of Record
___ Septic	___ Plans Reviewed	___ Flood Zone
___ Site Use Approved	___ Required Inspections Assigned	___ FDEP Needed
___ Docs Reviewed/Accepted	___ Invoiced	

APPLICANT:

PHONE:

ADDRESS:

OWNER: ROACH EDNA, FOSTER TAMMY ROACH

PHONE:

ADDRESS: 8229 SW STATE ROAD 247 LAKE CITY, FL 32024

PARCEL ID: 31-4S-16-03253-000

SUBDIVISION:

LOT: BLOCK: PHASE: UNIT: ACRES: 5.03

CONTRACTOR

TYPE

LIC#

BUSINESS NAME

JOB DETAILS

Description of the work being performed:

Total Estimated Cost

Commercial or Residential?

Type of Structure

Heated Area (Sqft)

Total Area (Sqft)

If remodel of damage, what was the cause?

Site Plan Setbacks Front 0

Site Plan Setback Side 1 0

Site Plan Setback Side 2 0

Site Plan Setbacks Rear 0

Existing Dwelling Units

Septic#

Power Company Used:

Service Amps

Current Use/Occupancy of building:

Is this changing?

If Yes, Explain, Proposed Use/Occupancy

Is the building Fire Sprinkled?

Are blue prints included?

Any driveway changes?

Please explain any Ingress/Egress changes:

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.)

Review Notes: