

CONTRACTOR ROOFING AFFIDAVIT

Columbia County, Florida
Building Department
135 NE Hernando Avenue
Lake City, Florida 32055
Phone: 386-758-1008
www.columbiacountyfla.com

NOT REQUIRED FOR OWNER BUILDERS

Job Address: 649 SW Walter Ave Lake City, FL 32024

I (Print Name) TRISTAN HALL, Licensed as a Contractor,
 Engineer, or Architect, with License # CCC1331951 do hereby affirm that all of the information provided to obtain this permit is true and accurate and that the sheathing, nailing, dry-in, venting, and flashings at the above referenced address will be installed in accordance with the applicable codes, Florida Product Approval installation instructions and standards set forth in the most current edition of the Florida Building Code - Residential and the Florida Building Code - Existing Building.

Tristan Hall
(Affiant Signature)

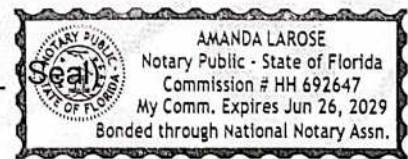
TRISTAN HALL
(Printed Name - if other than contractor)

Include POA or Agent Authorization upon submission.

STATE OF FLORIDA
COUNTY ST. JOHNS

The foregoing instrument acknowledged before me by means of physical presence or online notarization, this 26 day of May 2026, by Tristan Hall, who is personally known to me or has provided the following identification _____.

Notary Public Signature *Amanda Larose*
Notary Printed Name Amanda Larose



FINAL INSPECTION & CERTIFICATE OF COMPLETION: This completed form and photographs must be uploaded to your permit via online at the Application Submission login (link) Welcome to Columbia County Online (columbiacountyfla.com).

If for a roofing permit, clearly visible in the Photographs must be the permit number or address and must include a ruler or measuring device to confirm nail spacing and overlaps including drip edge and valley flashing. (Not required for additions or New Residential)

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