

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

For Office Use Only Application # 43873 Date Received 10/22 By MG Permit # 38795
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 _____

Applicant (Who will sign/pickup the permit) Bobbie Polk FAX 386-719-4472
Address 3229 SW Main Blvd. Lake City FL 32025 Phone 386-965-9926
Owners Name David J + Diana I Mate Phone 386-623-5783
911 Address 194 SW Meridith Lane Lake City FL 32024
Contractors Name Lewis Walker Phone 866-959-7663
Address PO Box 2147 Lake City FL 32056
Contractors Email permittingLWR@gmail.com ***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 22-45-16-03090-312

Subdivision Name Blaine Estates Phase 3 Lot 12 Block _____ Unit _____ Phase 3

Driving Directions Take NE Hernando Ave to N Marion Ave (0.1mi) Take SW Sisters Welcome Rd to SW Friendshipway (7.5mi) Take SW Buchanan Dr. to SW Meridith Ln. (0.7mi) Destination is on the Right.

Construction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other _____

Cost of Construction 10,084.⁰⁰ _____ Commercial OR ☒ Residential

Type of Structure (House; Mobile Home; Garage; Exxon) Mobile Home (000200)

Roof Area (For this Job) SQ FT 2700 Roof Pitch 3 /12, _____ /12 Number of Stories 1

Is the existing roof being removed No If NO Explain 29 GA Rib Metal Roof-over existing shingle roof.

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) 29 GA Rib Metal

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction. **CODE: 2014 Florida Building Code.**

Columbia County Building Permit Application

TIME LIMITATIONS OF APPLICATION : An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

TIME LIMITATIONS OF PERMITS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO CONTRACTOR AND AGENT: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

David Mate

Print Owners Name

Owners Signature

****Property owners must sign here before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

Contractor's Signature

Contractor's License Number RC00067442
Columbia County
Competency Card Number 001174

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 21 day of Oct 2019.

Personally known Barbara Johnston or Produced Identification

Barbara Johnston
State of Florida Notary Signature (For the Contractor)

SEAL:



BARBARA JOHNSTON
Commission # GG 306135
Expires May 6, 2023
Bonded Thru Budget Notary Services

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ www.floridabuilding.org

| Category/Subcategory | Manufacturer | Product Description | Approval Number(s) |
|---------------------------------|--------------|-----------------------|--------------------|
| 1. EXTERIOR DOORS | | | |
| A. SWINGING | | | |
| B. SLIDING | | | |
| C. SECTIONAL/ROLL UP | | | |
| D. OTHER | | | |
| | | | |
| 2. WINDOWS | | | |
| A. SINGLE/DOUBLE HUNG | | | |
| B. HORIZONTAL SLIDER | | | |
| C. CASEMENT | | | |
| D. FIXED | | | |
| E. MULLION | | | |
| F. SKYLIGHTS | | | |
| G. OTHER | | | |
| | | | |
| 3. PANEL WALL | | | |
| A. SIDING | | | |
| B. SOFFITS | | | |
| C. STOREFRONTS | | | |
| D. GLASS BLOCK | | | |
| E. OTHER | | | |
| | | | |
| 4. ROOFING PRODUCTS | | | |
| A. ASPHALT SHINGLES | | | |
| B. NON-STRUCTURAL METAL | Agri-Metal | 29GA Rib Metal Panels | 13768-1 |
| C. ROOFING TILES | | | |
| D. SINGLE PLY ROOF | | | |
| E. OTHER | | | |
| | | | |
| 5. STRUCTURAL COMPONENTS | | | |
| A. WOOD CONNECTORS | | | |
| B. WOOD ANCHORS | | | |
| C. TRUSS PLATES | | | |
| D. INSULATION FORMS | | | |
| E. LINTELS | | | |
| F. OTHERS | | | |
| | | | |
| 6. NEW EXTERIOR | | | |
| ENVELOPE PRODUCTS | | | |

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

Contractor OR Agent Signature

Date

NOTES: _____

Columbia County Property Appraiser

Jeff Hampton

2019 Preliminary Certified Values

updated: 8/14/2019

Parcel: << **22-4S-16-03090-312** >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

Result: 3 of 3

| | | | |
|--------------|--------------------------------------------------------------------------------|--------------|-----------|
| Owner | MATE DAVID J & DIANA I 194 SW MERIDITH LN LAKE CITY, FL 32024 | | |
| Site | 194 MERIDITH LN, LAKE CITY | | |
| Description* | LOT 12 BLAINE ESTATES PHASE 3. WD 1119-427. | | |
| Area | 1.01 AC | S/T/R | 22-4S-16E |
| Use Code** | MOBILE HOM (000200) | Tax District | 3 |

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

| 2018 Certified Values | | 2019 Preliminary Certified | |
|-----------------------|---------------------------------------------|----------------------------|---------------------------------------------|
| Mkt Land (2) | \$17,850 | Mkt Land (2) | \$19,100 |
| Ag Land (0) | \$0 | Ag Land (0) | \$0 |
| Building (1) | \$62,573 | Building (1) | \$71,051 |
| XFOB (6) | \$13,190 | XFOB (6) | \$13,190 |
| Just | \$93,613 | Just | \$103,341 |
| Class | \$0 | Class | \$0 |
| Appraised | \$93,613 | Appraised | \$103,341 |
| SOH Cap [?] | \$978 | SOH Cap [?] | \$8,946 |
| Assessed | \$92,635 | Assessed | \$94,395 |
| Exempt | HX H3 OTHER \$92,635 | Exempt | HX H3 OTHER \$94,395 |
| Total Taxable | county:\$0 city:\$0 other:\$0 school:\$0 | Total Taxable | county:\$0 city:\$0 other:\$0 school:\$0 |

**▼ Sales History**

| Sale Date | Sale Price | Book/Page | Deed | V/I | Quality (Codes) | RCode |
|-----------|------------|-----------|------|-----|-----------------|-------|
| 5/11/2007 | \$42,500 | 1119/0427 | WD | V | Q | |

▼ Building Characteristics

| Bldg Sketch | Bldg Item | Bldg Desc* | Year Blt | Base SF | Actual SF | Bldg Value |
|-------------|-----------|--------------------|----------|---------|-----------|------------|
| Sketch | 1 | SFR MANUF (000200) | 2007 | 2280 | 2280 | \$71,051 |

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

▼ Extra Features & Out Buildings (Codes)

| Code | Desc | Year Blt | Value | Units | Dims | Condition (% Good) |
|------|------------|----------|------------|---------|-------------|--------------------|
| 0296 | SHED METAL | 2007 | \$5,400.00 | 450.000 | 18 x 25 x 0 | (000.00) |
| 0060 | CARPORT F | 2007 | \$1,625.00 | 325.000 | 13 x 25 x 0 | (000.00) |
| 0296 | SHED METAL | 2007 | \$2,765.00 | 288.000 | 12 x 24 x 0 | AP (020.00) |
| 0190 | FPLC PF | 2007 | \$1,200.00 | 1.000 | 0 x 0 x 0 | (000.00) |
| 0120 | CLFENCE 4 | 2014 | \$600.00 | 1.000 | 0 x 0 x 0 | (000.00) |

▼ Land Breakdown

| Land Code | Desc | Units | Adjustments | Eff Rate | Land Value |
|-----------|--------------|-----------------------|---------------------|----------|------------|
| 000200 | MBL HM (MKT) | 1.000 LT - (1.010 AC) | 1.00/1.00 1.00/1.00 | \$15,850 | \$15,850 |

Inst: 20191202-4469 Date: 10/22/2019 Time: 2:11PM
 Page 1 of 1 B: 1396 P: 2626, P. DeWitt Cason, Clerk of Court
 Columbia, County, By: BD
 Deputy Clerk

PERMIT NUMBER: _____

NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. DESCRIPTION OF PROPERTY (Legal description of the property & street address, if available) TAX FOLIO NO.: 22-4S-16-03090-312
 SUBDIVISION BLAINE ESTATES PHASE 3 BLOCK _____ TRACT _____ LOT 12 BLDG _____ UNIT _____
22-4S-16E 194 SW MERIDITH LN LAKE CITY, FL 32024

2. GENERAL DESCRIPTION OF IMPROVEMENT:
ROOF-OVER

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a. Name and address: MATE DAVID J & DIANA I 194 SW MERIDITH LN LAKE CITY, FL 32024

b. Interest in property: OWNER

c. Name and address of fee simple titleholder (if different from Owner listed above): _____

4. a. CONTRACTOR'S NAME: LEWIS WALKER

Contractor's address: PO BOX 2147 LAKE CITY FL 32056

b. Phone number: 866-959-7663

5. SURETY (if applicable, a copy of the payment bond is attached):

a. Name and address: _____

b. Phone number: _____ c. Amount of bond: \$ _____

6. a. LENDER'S NAME: _____

Lender's address: _____ b. Phone number: _____

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:

a. Name and address: _____

b. Phone numbers of designated persons: _____

8. a. In addition to himself or herself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

b. Phone number of person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): _____, 20____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

(Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

DAVID MATE -OWNER

(Print Name and Provide Signatory's Title/Office)

State of FLORIDA

County of COLUMBIA

The foregoing instrument was acknowledged before me this 18 day of OCT, 20 19

by David Mate (name of person), as owner (type of authority, ... e.g. officer, trustee, attorney in fact)
 for David Mate (name of party on behalf of whom instrument was executed)

Personally Known ☒ or Produced Identification _____ Type of Identification Produced _____



BARBARA JOHNSTON
 Commission # GG 306135
 Expires May 6, 2023
 Bonded Thru Budget Notary Services

Barbara A Johnston
 (Signature of Notary Public)
 (Print, Type, or Stamp Commissioned Name of Notary Public)