## **Columbia County Building Permit Application** Re-Roof's, Roof Repairs, Roof Over's Application # Date Received For Office Use Only Plans Examiner NOC Deed or PA G Contractor Letter of Auth. G F W Comp. letter Product Approval Form Sub VF Form Owner POA □ Corporation Doc's and/or Letter of Auth. 12 1clc Comments Applicant (Who will sign/pickup the permit) Address 209 **Owners Name** Whod 911 Address 29 **Contractors Name** Contractors Email NICETOD \*\*\*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** Construction of (circle) Re-Roof - Roof repairs - Roof Overlay or Other Cost of Construction Commercial OR Residential Type of Structure (House; Mobile Home; Garage; Exxon) Roof Area (For this Job) SQ FT 3**Roof Pitch Number of Stories** Is the existing roof being removed No If NO Explain

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.** 

Type of New Roofing Froduct (Metal; Shingles; Asphalt Flat)

Columbia County Building Permit Application Janice \_ Williams@ columbia 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 itumbered by any registrions or face possible litigation and of thes

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

\*\*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.

X Contractor's Signature

Contractor's License Number <u>CCC/33/52</u> Columbia County

Competency Card Number\_

Affirmed wher penalty of perjury to by the Contractor and subscribed before me this 29 day of JANUAR 20 20. lly known V // Preduced Identification

LALIRIE HODSON MY COMMISSION # FF 978102 EXPIRES: July 14, 2020 Bonded Thru Notary Public Unde

Page 2 of 2 (Both Pages must be submitted together.)

**Revised 7-1-15** 



As required by Florida Statute 553.842 and Florida Administrative Code 98-72, 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		1	
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			1 7 7
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	Tri County Me	als Metal Roofing	4595,19 R
C. ROOFING TILES	THE COUNTY IS	ary melal houring	
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCTURAL COMPONENTS	<del> </del>		-
A. WOOD CONNECTORS	1		
B. WOOD ANCHORS			1
C. TRUSS PLATES	<del>                                     </del>		
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
6. NEW EXTERIOR			
ENVELOPE PRODUCTS			t

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.

Wich Coli	01/29/2020	
Contractor OR Agent Signature	Date	NOTES:



## COLUMBIA COUNTY BUILDING DEPARTMENT Roof Inspection Affidavit

2000011

	Permit Number: 59220
Micholds Carr	,licensed as a(n) Contractor* /Engineer/Architect, FS 468 Building Inspector*
License #; CCC 133152 did personally inspect the	7 On or about 02/05/2020 (Date & time)
Metal attachment per n	nanufacturer's instructions Wailing of purlin per metal manufacturer's instructions
work at 294 SE (Job S)  Based upon that examinat	Secondary water barrier Roof to wall connection  Woodhaven St Lake City, Fl.,  Ite Address)  Roof to wall connection  City, Fl.,  Ite Address)  Retrofit Manual (Based on 553.844 F.S.)
STATE OF FLORIDA COUNTY OF COLUMBIA Sworn to are subscribed to	fore me this 29 day of January 20,70
Personally known Produced Identification	Notary Public, State of Florida  LAURIE HODSON (Print, type or spanne) MY COMMISSION # FF 976102 EXPIRES: July 14, 2020 Bonded Thru Notary Public Underwriters  Type of identification produced.

- \* Include photographs of each plane of the roof with the permit number clearly shown marked on the deck for each inspection. Place a tape measure next to the nailing pattern to show distance between nails.
- \* Photographs must clearly show all work and have the permit number indicated on the roof.
- \* Affidavit and Photographs must be provided when final inspection is requested.
- \* Metal overlay & purlin installations shall have photographs of purlins or underlayment, whichever applies.

Columbia County 1/06/2020 13:21 4/11/2017 BC	DEERWD FOR  AYB  AYB  AYB  (PUD1  EYB  (PUD1  APPR OF  (NTCD  CNDO  SUBD  BLK  LOT  MAP#  TXDT  O02  TXDT  O02  BAS1993=N21 W21  ESC  ESC  BAS1993=N21 W21  ESC  ESC  BAS1993=N21 W21  ESC  ESC  BAS1993=N21 W21  ESC  ESC  ESC  ESC  ESC  ESC  ESC  ES	CE ADC 120 0000 120 0000 120 0000 120 120 120
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LOT 3 DEERWOOD FOREST UNIT 464-661, 656-248, 819-2123, WD 1155-1337, WD 1223-2632	1 SFR	AE BN CODE DESC Y 1 0190 FPLC PF PATURES

## NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

09.45.17.08362.003

Clerk's Office Stamp

Inst: 202012002328 Date: 01/29/2020 Time: 1:14PM

Page 1 of 1 B: 1404 P: 1372, P.DeWitt Cason, Clerk of Court

Columbia, County, By: BD

**Deputy Clerk** 

of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.
1. Description of property (legal description); - Description
a) Street (job) Address: 294 SE Woodhaven St Lake City Fl
2. General description of improvements: metal root over shingles
3. Owner Information or Lessee information if the Lessee dontracted for the improvements:  a) Name and address: Karr Hilliard 194, SE Woodhaven St Lake Ci
b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property 4. Contractor Information
4. Contractor Information a) Name and address: Michold Carlucci 20977 180 St Live Oak b) Telephone No: 386-205-3865
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address:
b) Amount of Bond:
c) Felephone No.:
a) Name and address:
b) Phone No
7. Person 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) Telephone No.:
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(I)(a), Florida Statutes
a) Name: OF
b) Telephone No.:
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):
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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA 10.
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager
Printed Name and Signatory's Title/Office
L O
The foregoing instrument was acknowledged before me, a Florida Notary, this 29 th day of TANUALY 20 20, by:
Nicholas Carlurci as Contracton for Kari A Hilliano
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)
Personally Known OR Produced Identification Type
Notary Signature  Notary Stamp or Seal  Notary Public Underwriters