



City of Lake City Approval Letter Required before Building Permit Issuance



Service Representatives :

Growth Management: growthmanagement@lcfla.com,

Utilities: PelhamS@lcfla.com, MedearisK@lcfla.com, McGhinB@lcfla.com

Date: 3/26/2024

County Application # 64619

Applicant Name: KARI K ADERHOLD

Phone: 813-516-0505

Email: KADERHOLD@ADERHOLDROOFING.COM

Site Address: 146 SW ORTHOPAEDIC CT LAKE CITY, FL 32024

Parcel: 33-3S-16-02433-053

Acres: 2.96

Project Description: Roof Replacement or Repair

Existing Structures on Property:

Any tree removal:

Number of trees removed:

Trees remaining:

Utilities:

Utility Availability: Water: Available Sewer: Unavailable Gas: Available City Letter of Availability Required: No

Utility Active: Water: Active Sewer: Inactive Gas: Active Has Impact Fee: No Impact Fees paid:

Customer service official's name: **Shasta Pelham**

Reviewed: 3/27/2024

Requires Tap Inspection: No

Customer service official's notes:

Zoning:

Minimum Setback Requirements: Font: Side: Rear:

Landscape Requirements:

Flood Zone: B.F.E.: Finished Floor Elevation Requirement:

Site Approval Plan:

Special Exception: Variance:

Documents Required:

Needed Before Power: No

Needed Before CO: No

Zoning official clearance

Date Reviewed:

Access:

Permit Issued: Needed Before CO:

Access official clearance

Date Reviewed:

Code Enforcement:

Code Enforcement Cases: None Case Notes:

Code Enforcement clearance

Date Reviewed:

Special Notes to be noted on permit