

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

#2192

\$90⁰⁹

For Office Use Only Application # 1909-22 Date Received 9/9/19 By MG Permit # 38578

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) Robert Ogles FAX _____ Phone 386-590-4641
Address 505 Goldkist Blvd Live Oak FL 32064
Owners Name Stephanie Bartley + Gina Michelle Veltrup Phone 904-859-9046
911 Address 381 NW Sugar cane Pl Lake City FL 32055
Contractors Name Robert Ogles Ogles roofing + Const LLC Phone 386-364-4838
Address 505 Goldkist Blvd Live Oak FL 32064
Contractors Email Oglesroofing@gmail.com ***Include to get updates for this job.
Fee Simple Owner Name & Address N/A
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address N/A
Mortgage Lenders Name & Address N/A
Property ID Number 21-25-16-01689-114
Subdivision Name Suwannee Hills Lot 14 Block A Unit _____ Phase _____
Driving Directions Take Louisiana st / 41^{north} to NW Baughn st make left go NW Sugar cane Pl make rt address on left

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

Cost of Construction \$8,000^e Commercial OR ☒ Residential

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

Roof Area (For this Job) SQ FT 2600 Roof Pitch 3 /12, 3 /12 Number of Stories 1

Is the existing roof being removed No If NO Explain yes

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

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.

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

****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.

[Signature]
Contractor's Signature

Contractor's License Number CCC1328699
Columbia County
Competency Card Number 1019 ✓

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 9th day of Sept. 20 19.

Personally known _____ or Produced Identification ✓ FI Drives
Marshall H. Moore
State of Florida Notary Signature (For the Contractor)

SEAL:



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	Tamko	Heritage	FI18355-R4
B. NON-STRUCTURAL METAL			
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
BUILDING DEPARTMENT
Roof Inspection Affidavit**

Permit Number: 38578

I Robert Ogles Jr, licensed as a(n) Contractor /Engineer/Architect,
Print name FS 468 Building Inspector*

License #: CCC1328699 On or about 9-16-19
did personally inspect the (Date & time)

☐ Metal attachment per manufacturer's instructions ☐ Nailing of purlin per metal manufacturer's instructions
☒ Roof deck attachment ☒ Secondary water barrier ☐ Roof to wall connection

work at 381 Sugar Cane Pl, Lake City FL 32055
(Job Site Address)

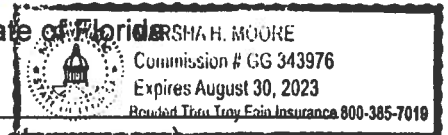
Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

[Signature]
Contractor's Signature

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to and subscribed before me this 9th day of September, 2019

By Marsha H. Moore, Notary Public, State of Florida



(Print, type or stamp name)

Personally known _____ or

Produced Identification ☒ Type of identification produced. FL Drivers License

*** 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 Property Appraiser

Jeff Hampton

2019 Preliminary Certified Values

updated: 8/14/2019

Parcel: << 21-2S-16-01689-114 >>

Owner & Property Info

Result: 1 of 34

Owner	BARTLEY STEPHANIE & GINA MICHELLE VELTRUP (JTWS) 381 NW SUGAR CANE PL LAKE CITY, FL 32055		
Site	381 SUGARCANE PL, LAKE CITY		
Description*	LOT 14 BLOCK A SUWANNEE HILLS S/D. 816 -1036, QC 1115-1061, QC 1118-2578, CT 1319 -1153, WD 1323-2709, WD 1328-1278, QC 1329-2281,		
Area	5.01 AC	S/T/R	21-2S-16
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)	\$21,551	Mkt Land (2)	\$22,801
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (1)	\$64,949	Building (1)	\$73,856
XFOB (2)	\$1,800	XFOB (1)	\$1,200
Just	\$88,300	Just	\$97,857
Class	\$0	Class	\$0
Appraised	\$88,300	Appraised	\$97,857
SOH Cap [?]	\$2,004	SOH Cap [?]	\$10,533
Assessed	\$86,296	Assessed	\$87,324
Exempt	HX H3 \$50,000	Exempt	HX H3 \$50,000
Total Taxable	county:\$36,296 city:\$36,296 other:\$36,296 school:\$61,296	Total Taxable	county:\$37,324 city:\$37,324 other:\$37,324 school:\$62,324

Aerial Viewer Pictometry Google Maps

**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
12/31/2016	\$30,000	1329/2281	QC	I	U	11
12/30/2016	\$65,000	1328/1278	WD	I	U	18
10/12/2016	\$0	1323/2709	WD	I	U	18
7/13/2016	\$100	1319/1153	CT	I	U	18
3/28/2007	\$100	1115/1061	QC	I	U	01
1/17/1996	\$12,000	816/1036	SD	V	U	31

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	2	SFR MANUF (000200)	2008	2280	2280	\$73,856

*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.

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number: _____

Clerk's Office Stamp

Inst: 201912020849 Date: 09/09/2019 Time: 12:14PM
Page 1 of 1 B: 1394 P: 104, P. DeWitt Cason, Clerk of Court Columbia County, By: KV
Deputy Clerk

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): 21-25-16-01689-114
a) Street (job) Address: 381 Sugar Lane Pl Lake City FL 32056
2. General description of improvements: new shingle roof
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Stephanie Bartley & Lina Michelle Veltrup 381 Sugar Lane Pl Lake City
b) Name and address of fee simple titleholder (if other than owner) N/A
c) Interest in property Owner
4. Contractor Information
a) Name and address: Ogles Roofing & Const. LLC 505 Goldkist Blvd Live Oak FL 32064
b) Telephone No.: 386-364-4828
5. Surety Information (If applicable, a copy of the payment bond is attached):
a) Name and address: N/A
b) Amount of Bond: N/A
c) Telephone No.: N/A
6. Lender
a) Name and address: N/A
b) Phone No.: N/A
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: N/A
b) Telephone No.: N/A
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(1)(b), Florida Statutes:
a) Name: N/A OF N/A
b) Telephone No.: N/A
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]

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

Robert Ogles #
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 9th day of Sept., 2019, by:

Robert L. Ogles as _____ for _____
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known _____ OR Produced Identification ☒ Type Fl. Drivers License

Notary Signature Marsha H. Moore Notary Stamp or Seal:

