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

For Office Use Only Application # Date Received By Permit #			
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			
FAX			
Applicant (Who will sign/pickup the permit) Eric Shane Smalley Phone 352-327-7663			
Address 339 S. M. Rolling Gkn. Fort Mhite FL 32038			
Applicant (Who will sign/pickup the permit) Eric Shane Smalley Phone 352-327-7663 Address 339 S. Int. Rolling Glen, Fort Inthite, Ft. 32038 Owners Name Dayna M. Clifford Phone 352-235-4060			
911 Address 339 S.W. Rolling Glen, Fort White, FL 32038			
Contractors Name atlantic Roofing & Exteriors, LLC Phone 352-327-7663			
Address 4739 N.W. 53rd Ave, Ste A, Bainesviile, Fr. 32653			
Contractors Email <u>maina</u> at lantic roofing fl. 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 29-45-16-03969-016			
Subdivision Name Lot Block Unit Phase			
Special Driving Instructions (only)			
Construction of (circle) Replacement-Tear off Existing and Replace; Overlay with Metal; Recover-New Material over			
Existing; Partial Roof Repairs or Other			
Ventilation: (circle) Ridge Vent; Off ridge vent; Powered Vent; Unvented 750 box vents			
Flashing: (circle) Use Existing; Repair Existing; Replace All; Replace w/L-Flashing; Replace w/step-Flashing			
Drip Edge: (circle) Use Existing; Repair Existing; Replace All			
Valley Treatment: (circle) Use Existing; New Metal New Mineral Surface			
# T766 W			
Cost of Construction 5,700.00Commercial ORResidential			
Cost of ConstructionCommercial ORResidential Type of Structure (House: Mobile Home: Garage; Exxon)Mobile Home Roof Area (For this Job) SQ FT Roof Pitch			
Type of Structure (House; Mobile Home: Garage; Exxon) Mobile Home			

Columbia County Building Permit Application - "Owner and Contractor Signature Page"

CODES: 2020 Florida Building Code 7th Edition and the 2017 National Electrical Code.

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.

<u>TIME LIMITATIONS OF APPLICATION</u>: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless pursued in good faith or a permit has been issued.

<u>TIME LIMITATIONS OF PERMITS:</u> 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.

before any permit will be issued. **Printed Owners Name** Owners Signature **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 License Number CCC 1326702 Contractor's Signature Columbia County Competericy Card Number Affirmed and subscribed before me the Contractor by means of physical presence or online notarization, this day of 10vem ber 20 23 . who was personally known or produced ID Notary Public State of Florida MaRita J Halcomb SEAL: State of Florida Notary Signature (For the Contractor) My Commission HH 329126 Expires 11/3/2026

**Property owners must sign here



ROOFING UNDERLAYMENT AFFIDAVIT

Columbia County, Florida Building Department 135 NE Hernando Avenue

Lake City, Florida 32055 Phone: 386-758-1008

www.columbiacountyfla.com

REQUIRED FOR WALK-IN OR PAPER SUBMITTALS Job Address: 339 S.W. Rolling Glen, Fort White, FL 32038 I (<u>Print Name</u>) Share Smarley, as a Florida license Roofing Contractor or an Owner Builder, I understand to comply with the 2020 Florida Building Code 7th Edition underlayment requirements, I must select an option for sealing the roof deck. The options are summarized below... a self-adhering polymer-modified bitumen underlayment complying with ASTM D1970 applied over the entire roof. a minimum 4-inch wide strip of selfadhering polymer-modified bitumen complying with ASTM D1970 or a minimum 3 \(\frac{3}{4} \) - inch wide strip of selfadhering flexible flashing tape complying with AAMA 711, applied over all joints in the roof decking. A felt underlayment complying with ASTM D226 Type II, ASTM D4869 Type III or IV, or ASTM D6757, or a synthetic underlayment meeting the performance requirements specified, is required to be applied over the strips/tape over the entire roof. two layers of felt underlayment comply ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified. Other (explain) Contractor/Owners Signature

FINAL INSPECTION & CERTIFICATE OF COMPLETION:

This completed form and photographs must be uploaded to your permit via online at the Application Submission login (link) <u>Welcome to Columbia County Online (columbiacountyfla.com)</u>.

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.

NOTICE OF COMMENCEMENT	Clerk's Office Stamp
Tax Parcel Identification Number:	
of the Florida Statutes, the following information is p	ements will be made to certain real property, and in accordance with Section 713.13 provided in this NOTICE OF COMMENCEMENT.
Description of property (legal description): COMM a) Street (job) Address: 339 SW Rolling Glen, For	SE COR OF SW1/4 OF NE1/4, RUN N 468.74 FT FOR POB, RUN W 400 FT, N 544.50 FT, E 400 FT on White, FL 32038
2. General description of improvements: Re-roof	
Owner Information or Lessee information if the Le a) Name and address: CLIFFORD DAYNA M, 339	SW ROLLING GLENFORT WHITE, FL 32038
b) Name and address of fee simple titlehol	der (if other than owner)
A Ctuester Information	
 a) Name and address: Atlantic Roofing & Exterior 	rs 4739 N.W. 53rd Ave., Ste A, Gville, FL 32653
b) Telephone No.: 352-327-7663	a least in the shoot
5. Surety Information (if applicable, a copy of the pa	yment bond is attached):
c) Telephone No.:	
6. Lender	
b) Phone No	
7. Person within the State of Florida designated by C	Owner upon whom notices or other documents may be served as provided by Section
a) Name and address: b) Telephone No.:	
	es the following person to receive a copy of the Lienor's Notice as provided in
a) Name:	OF
b) Telephone No.:	
Expiration date of Notice of Commencement (the is specified):	expiration date will be 1 year from the date of recording unless a different date
COMMENCEMENT ARE CONSIDERED IMPI FLORIDA STATUTES, AND CAN RESULT IN NOTICE OF COMMENCEMENT MUST BE R	MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF ROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A ECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE OUR NOTICE OF COMMENCEMENT.
STATE OF FLORIDA COUNTY OF COLUMBIA	
	Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manage
	Printed Name and Signatory's Title/Office
The foregoing instrument was acknowledged before	e me, by means of Aphysical presence or Online notarization, a Florida Notary
	23 by: Dayna Clifford as owner
for Dayna Clifford	(Name of Person) (Type of Authority) who is personally known OR produced identification
(name of party on behalf of whom instrument w	vas executed)
	Notary Public 19/19/9/19/19/19/19
Matt	My Commission, HH 320126
Notary Signature	(Notary Stamp or 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	Iko	Cambridge	30310-123
B. NON-STRUCTURAL METAL	1 200	Comistroye	30310 123
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER	all weather Bldg. Sup	DUKSHELD CC	FL 41799.1-123
The state of the s	att water slag sup	por the Romana CC	FL -(1 1914.11-163
5. STRUCTURAL COMPONENTS		*	
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES	1		
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.

) 11/9/23	
Contractor OR Agent Signature	Date	NOTES: