

COLUMBIA COUNTY • COUNTY OF FLORIDA

Permit Application Form
Columbia County Building Department
135 NE Hernandez Avenue
Lake City, Florida 32055
Phone: 866-798-1008
www.columbiacountyfla.com

RE-ENTRY AFFIDAVIT

JOB ADDRESS: _____
City: _____ State: _____ Zip: _____

I, _____
License # _____
do hereby affirm that all of the information provided to obtain this permit is true and accurate and that I am the owner, contractor, architect or other person responsible for the project described in the referenced address will comply with the applicable codes, Florida product approval instructions and standards as set forth in the most current edition of the Florida Building Code Residential and the Florida Building Code Existing Building.

(Affiant Signature) _____

STATE OF _____
COUNTY _____

The foregoing instrument acknowledged before me by means of _____ physical presence _____ who is _____
on this _____ day of _____, 20____, by _____
I have provided the following identification:
☐ personally known to me or ☐ I have provided the following identification:

Notary Public Signature: _____
Notary Printed Name: _____

FINAL INSPECTION & CERTIFICATE OF COMPLETION:
This completed form and photographs must be submitted to your permit office at the Application Submittal upon final inspection to Columbia County, phone: 866-798-1008.
Clearly visible in the photograph must be the permit number or address, must include a ruler or measuring device to confirm nail spacing and overhang including also a photo of the building and attic venting.

Affirmation: I certify that I am a Notary Public and I am duly sworn in by the State of Florida.

Notary Seal: _____

IMG-20230525-WA0139.jpg

30-406: Albert Winarta (C-03/22)

Job Location: 1384 Southwest Indian Glen Lake City, FL 32025



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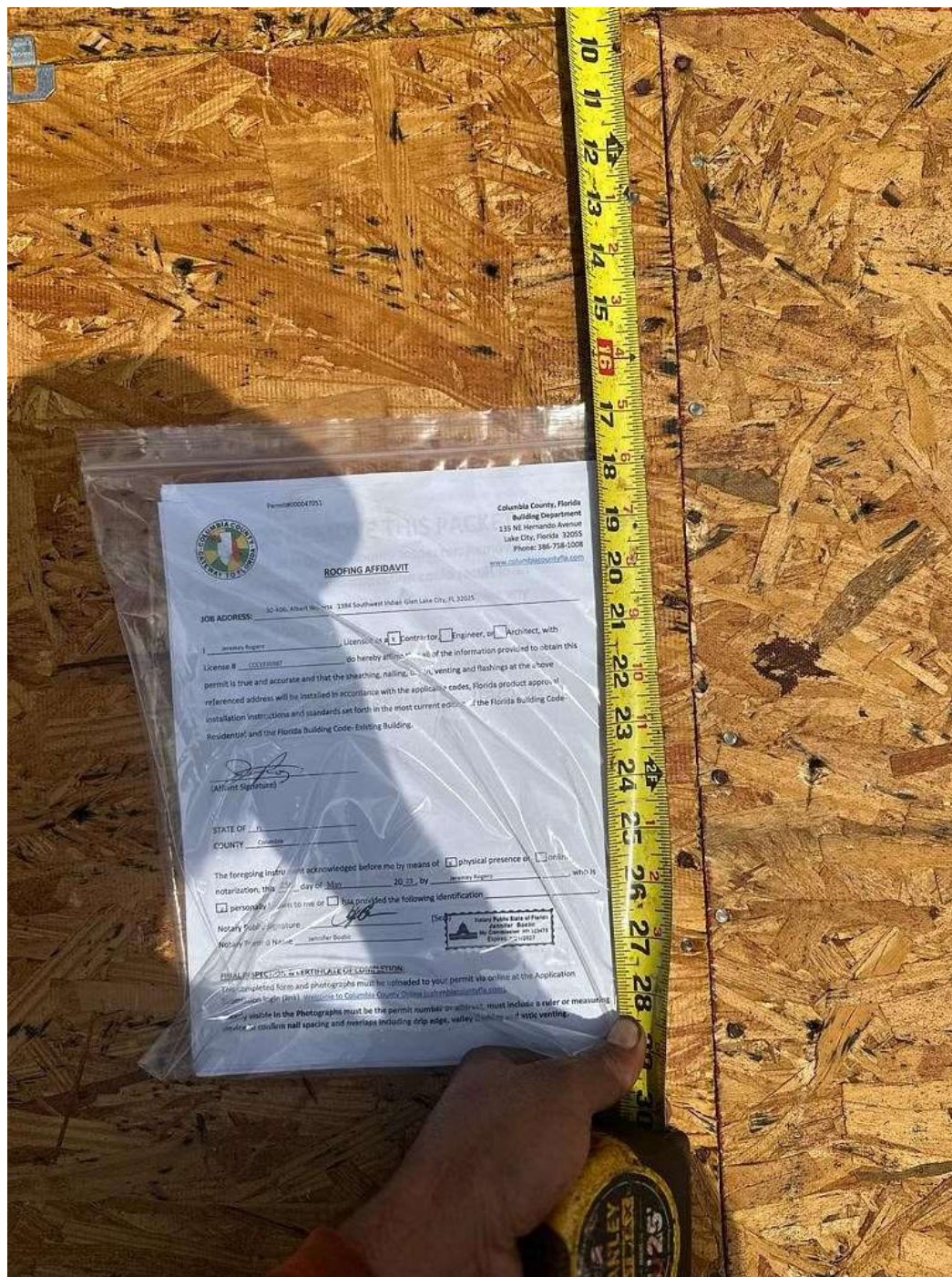
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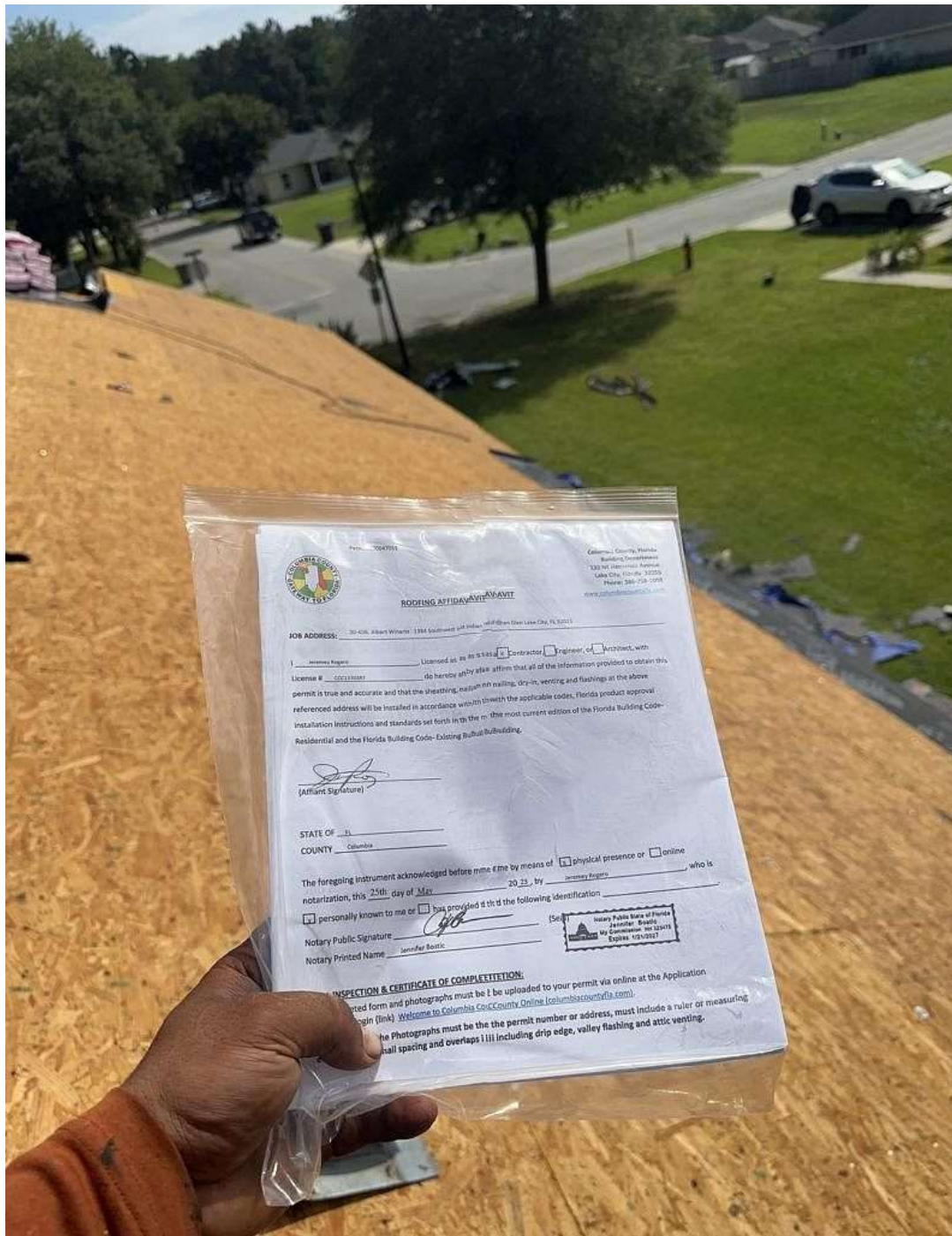
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30-406: Albert Winarta (C-03/22)

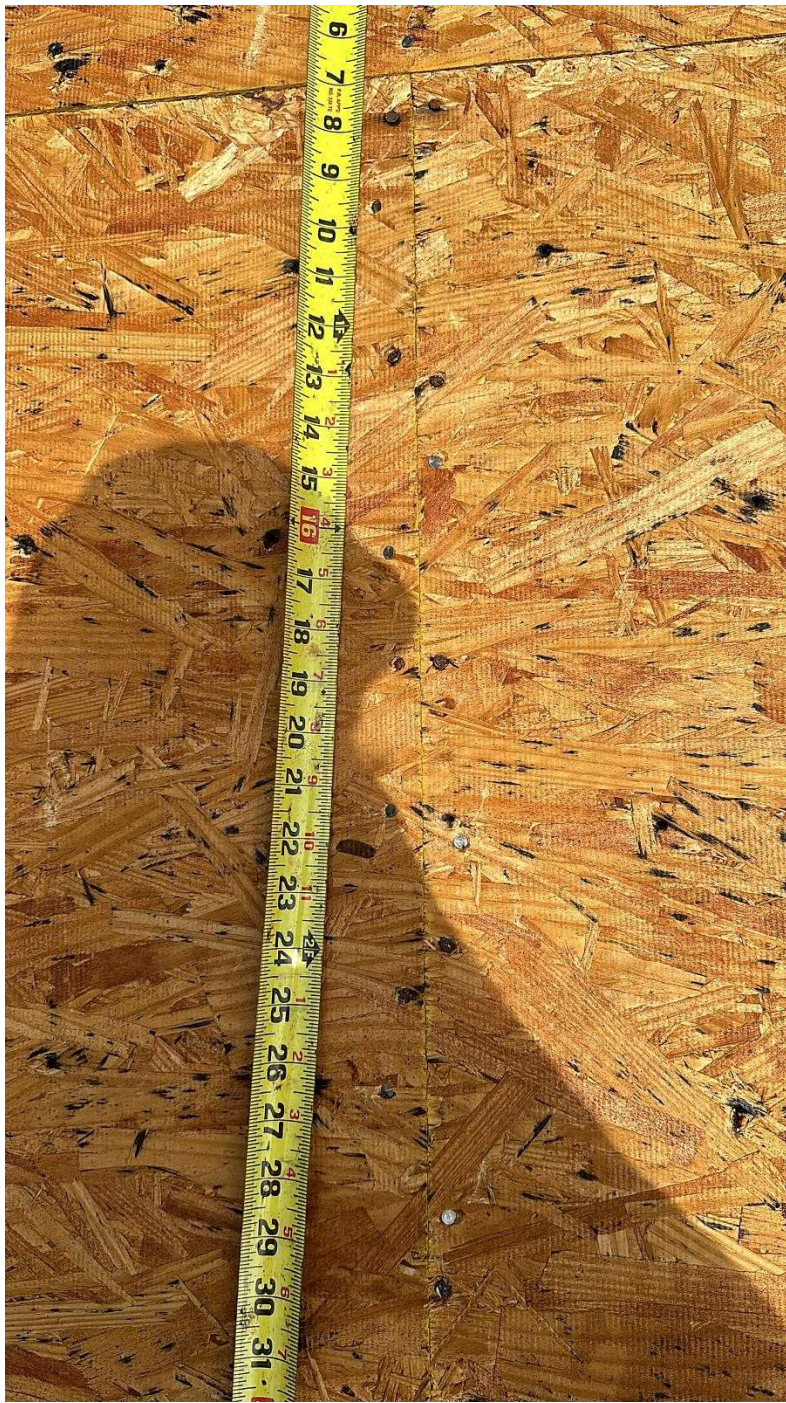
Job Location: 1384 Southwest Indian Glen Lake City, FL 32025



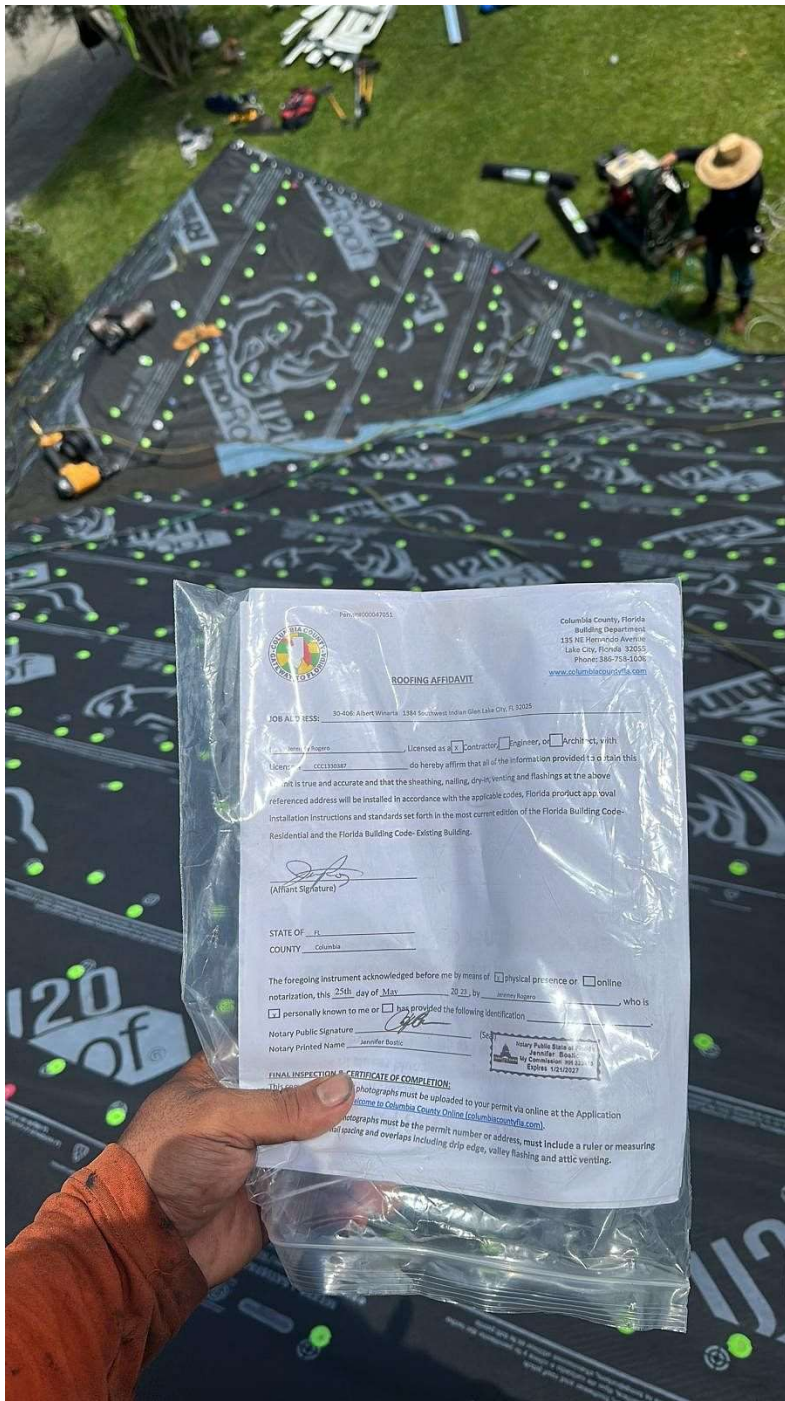
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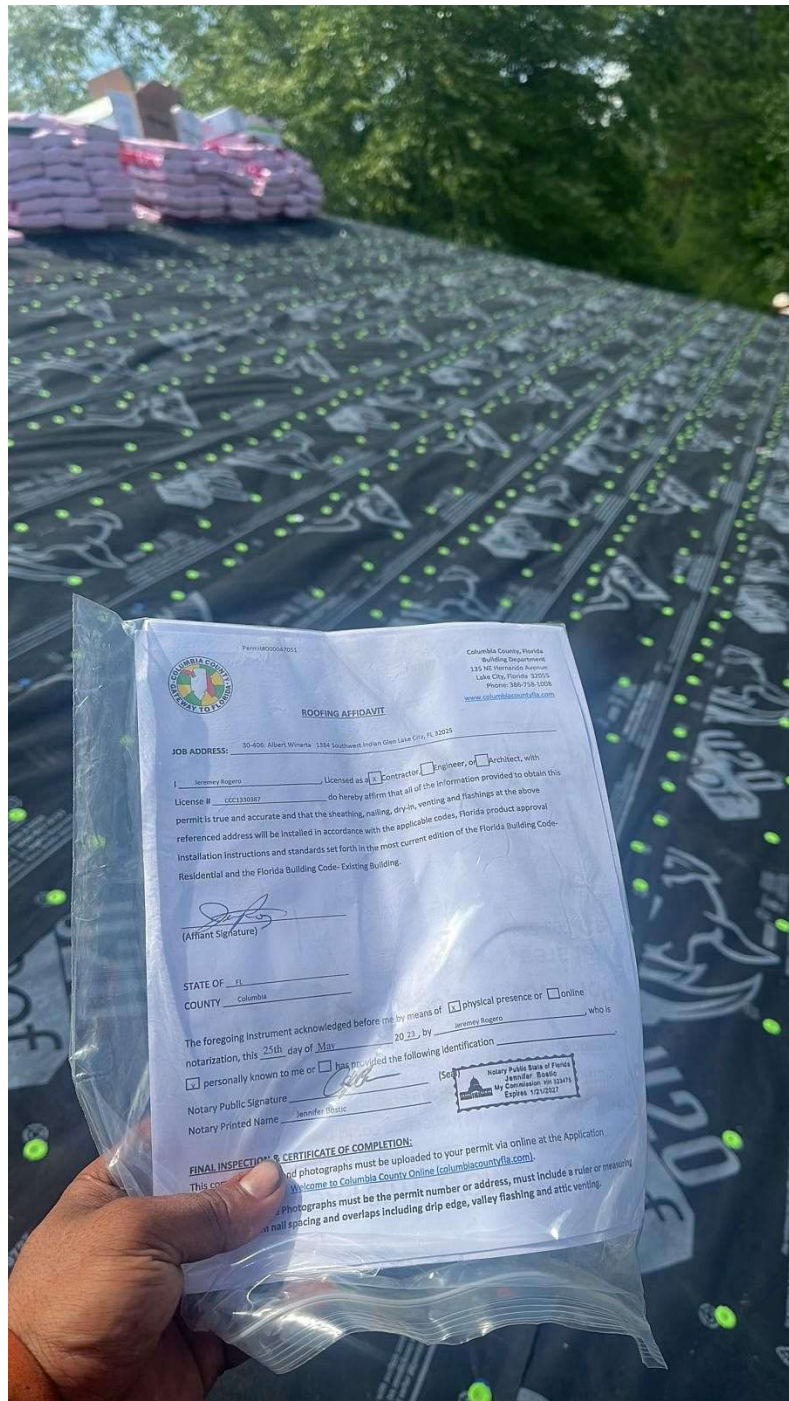
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30-406: Albert Winarta (C-03/22)

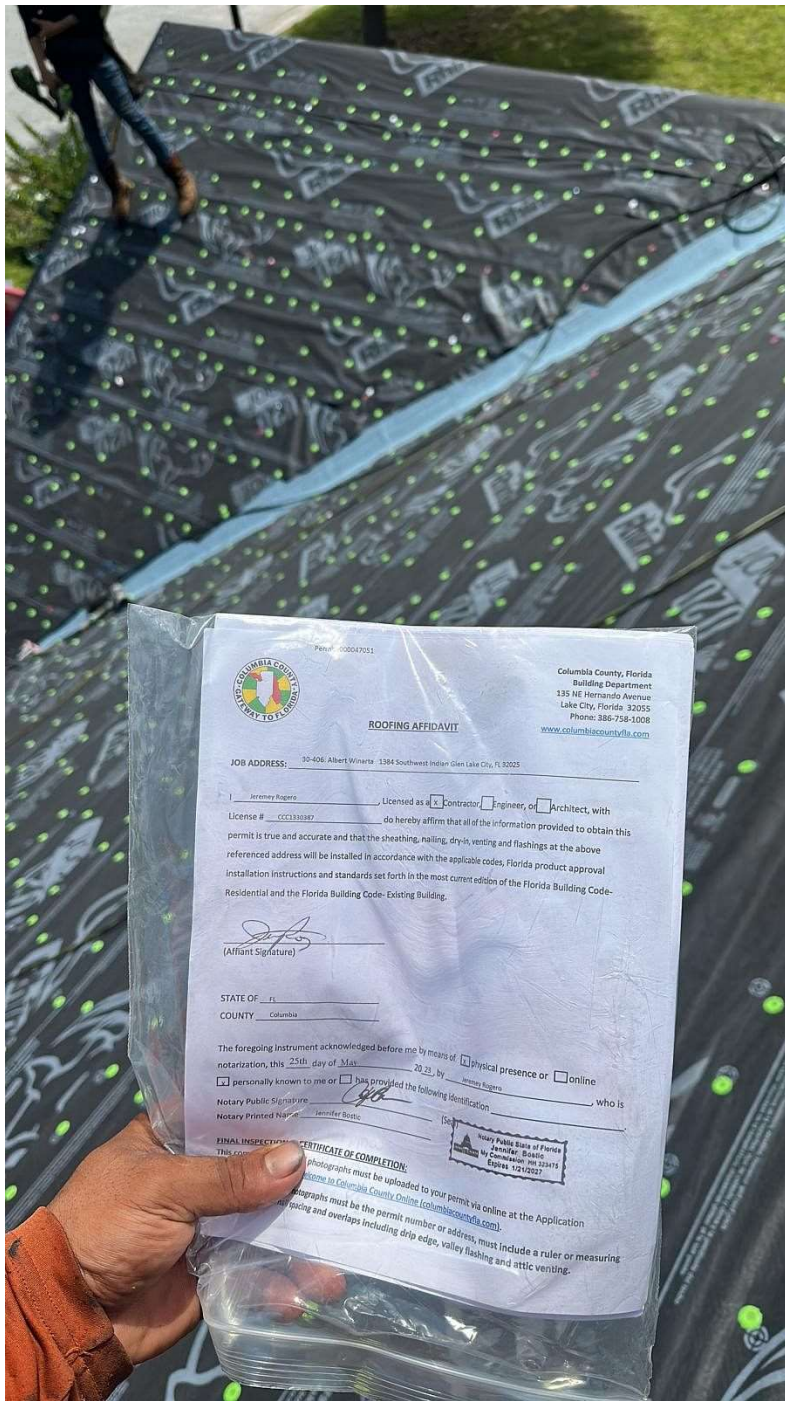
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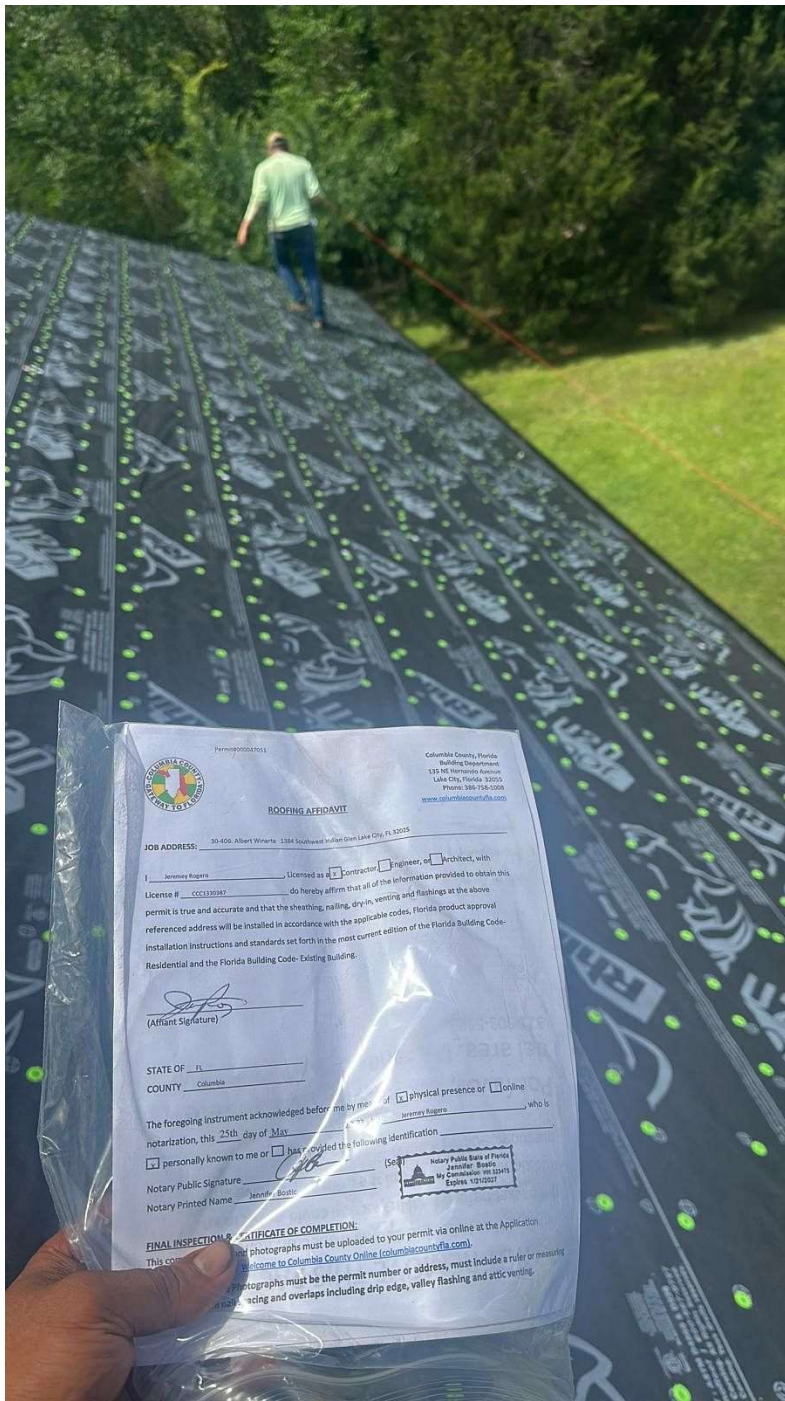
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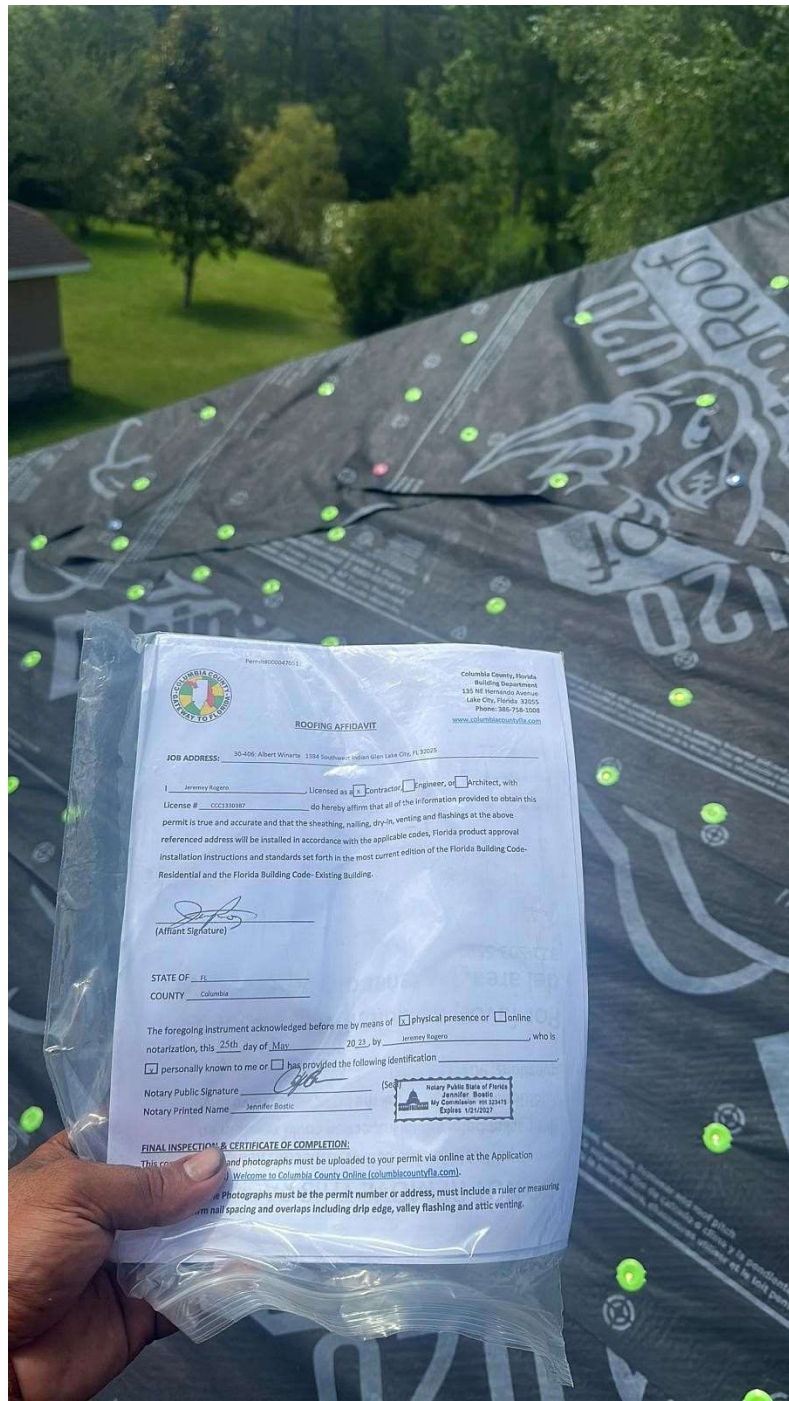
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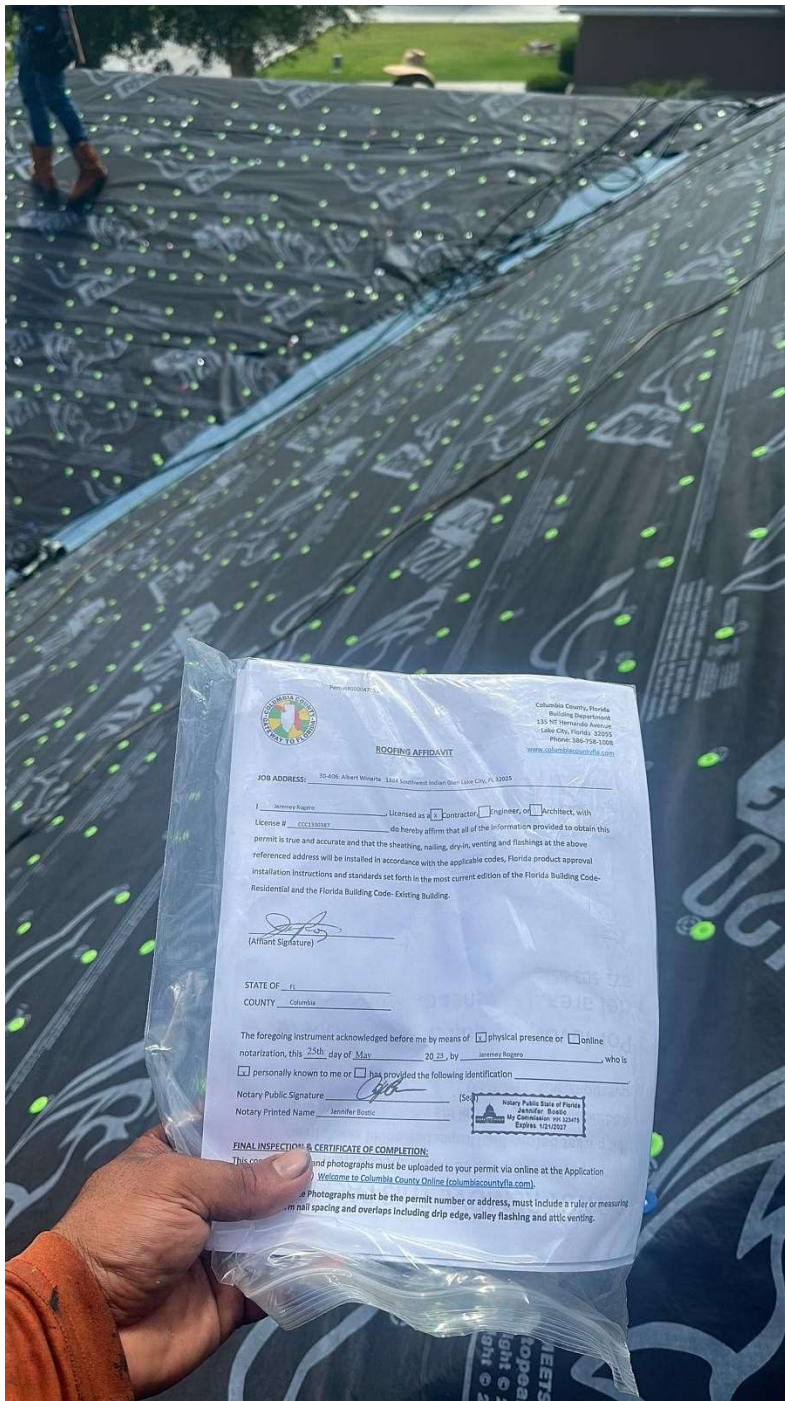
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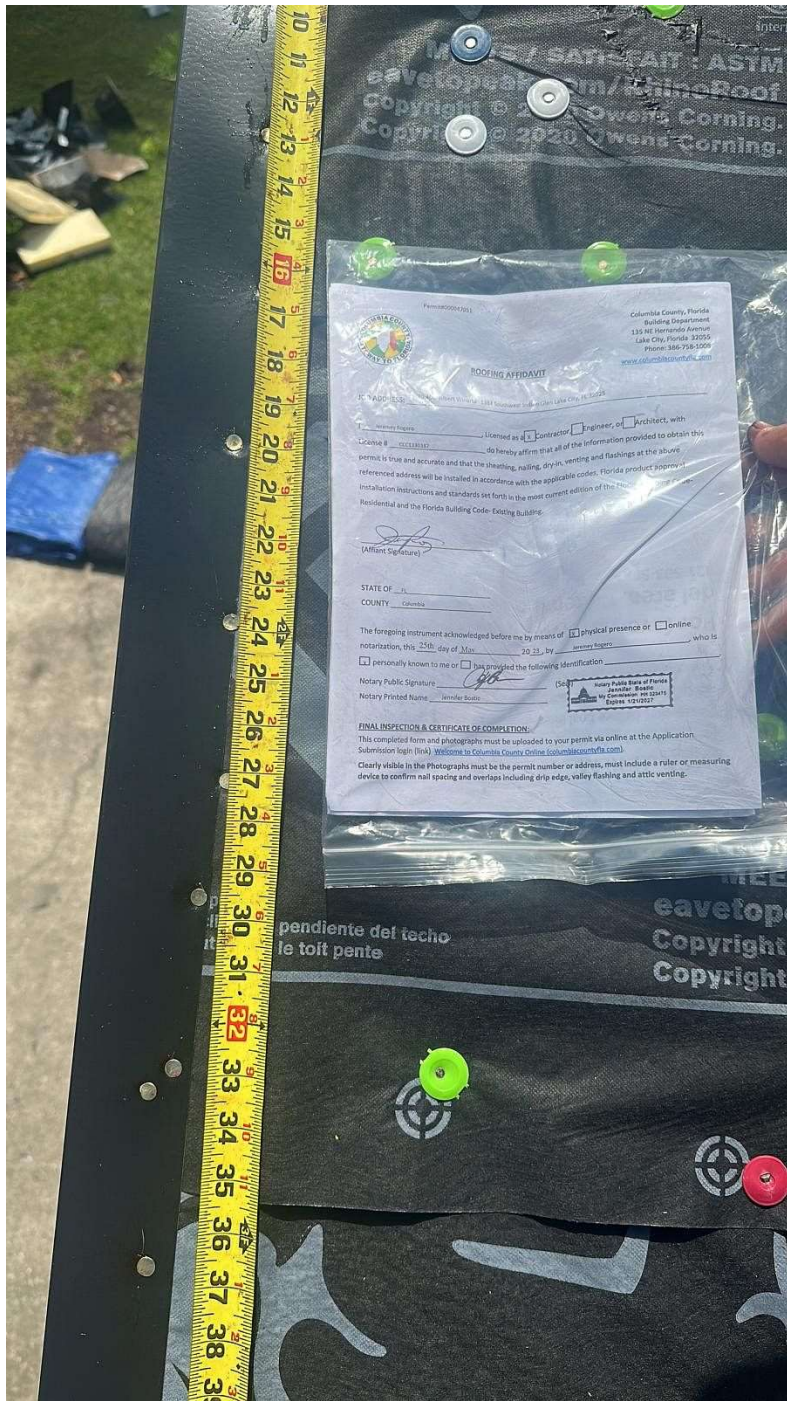
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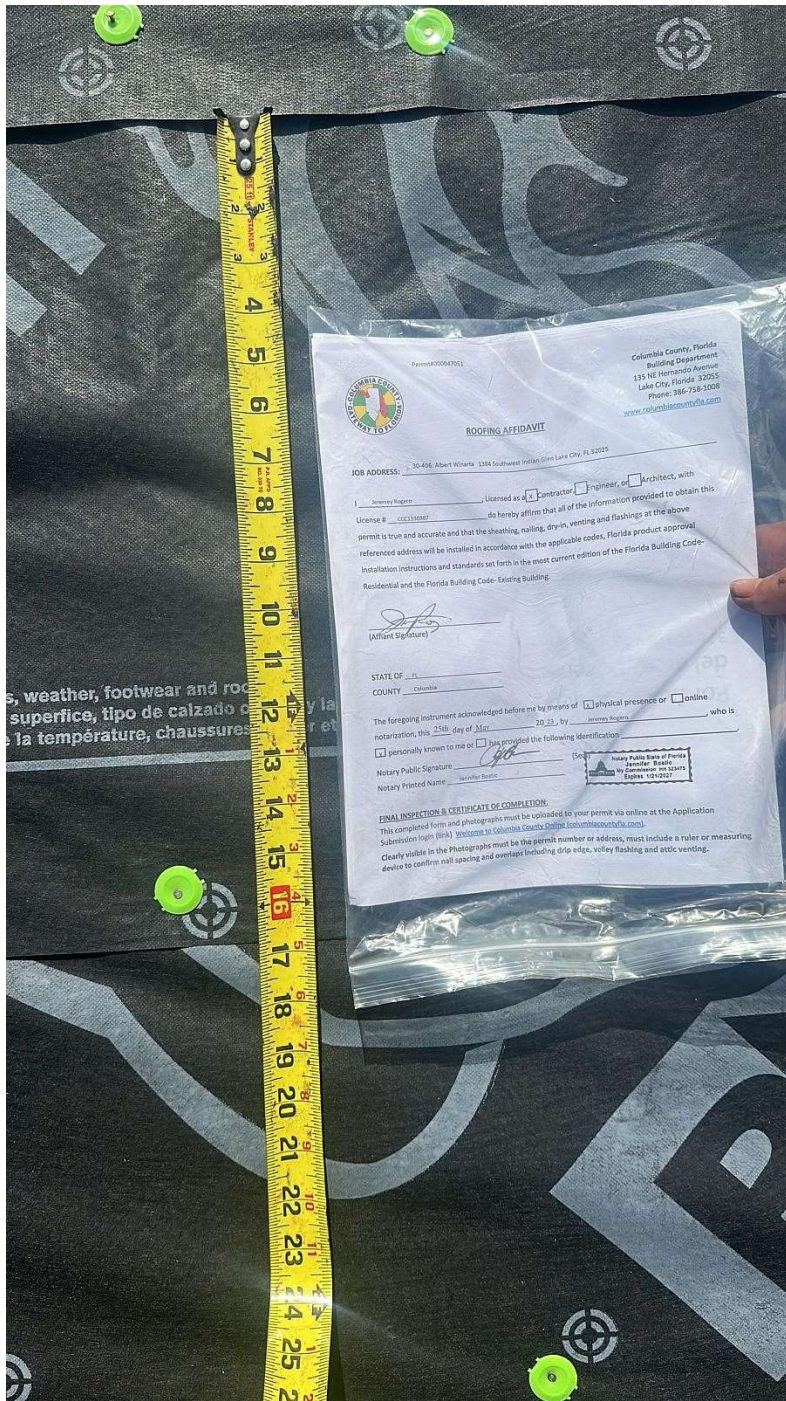
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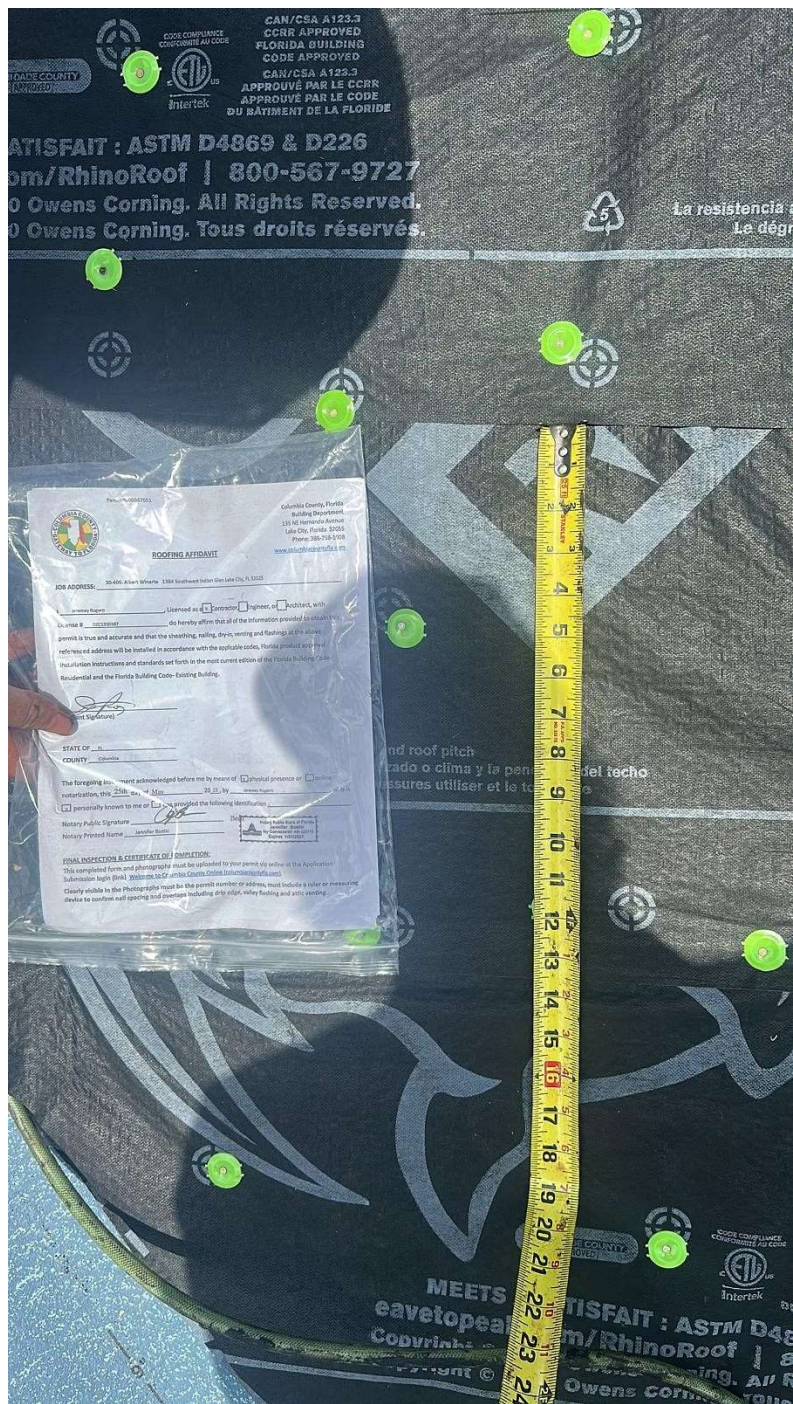
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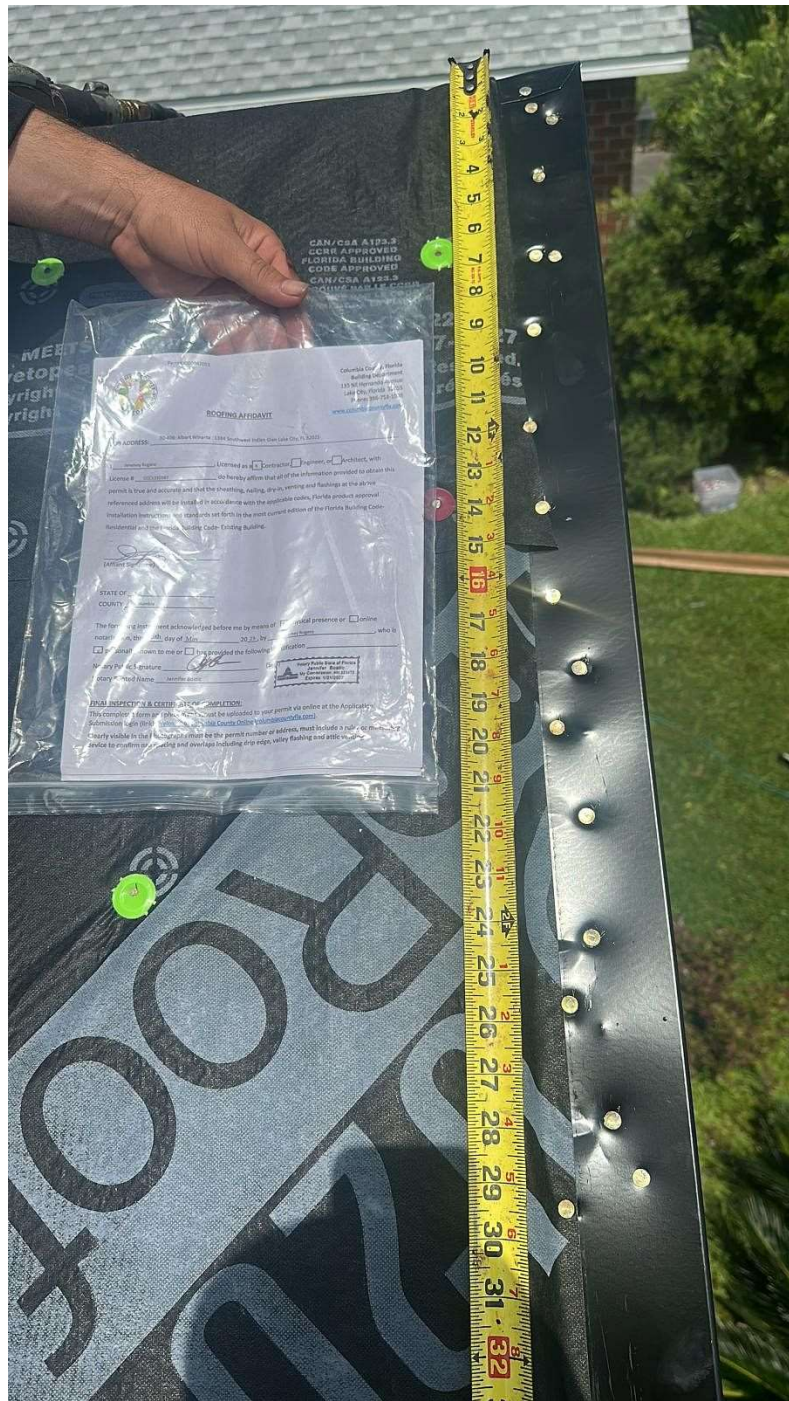
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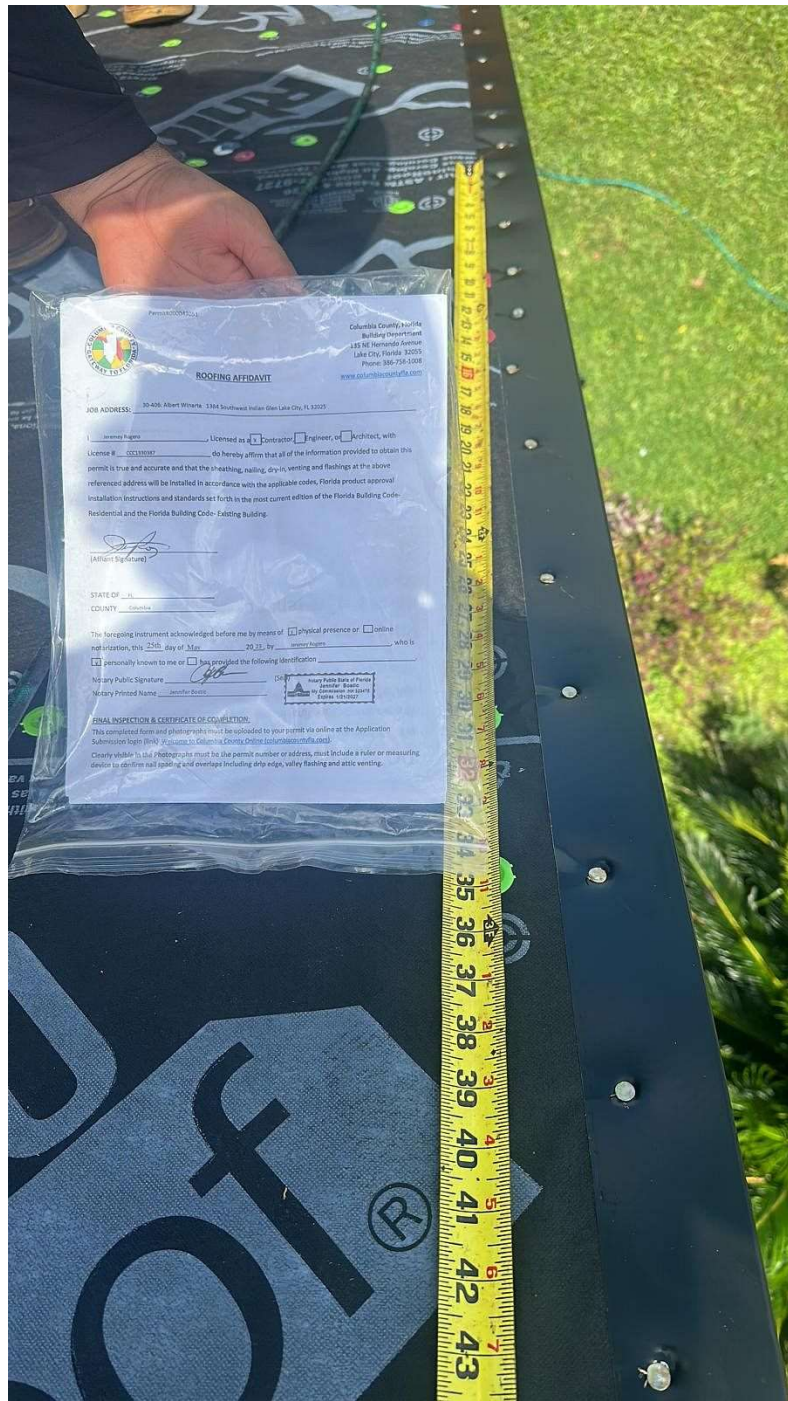
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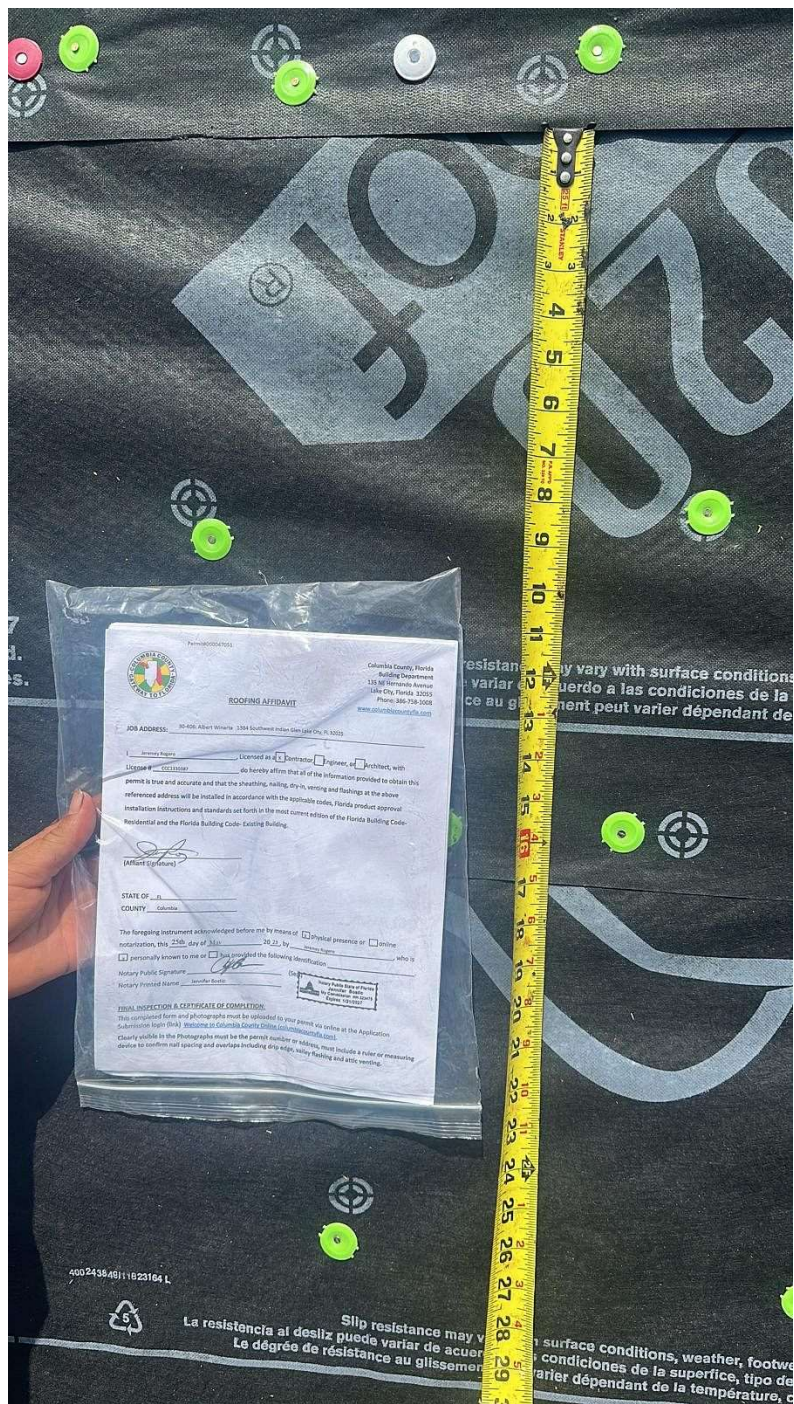
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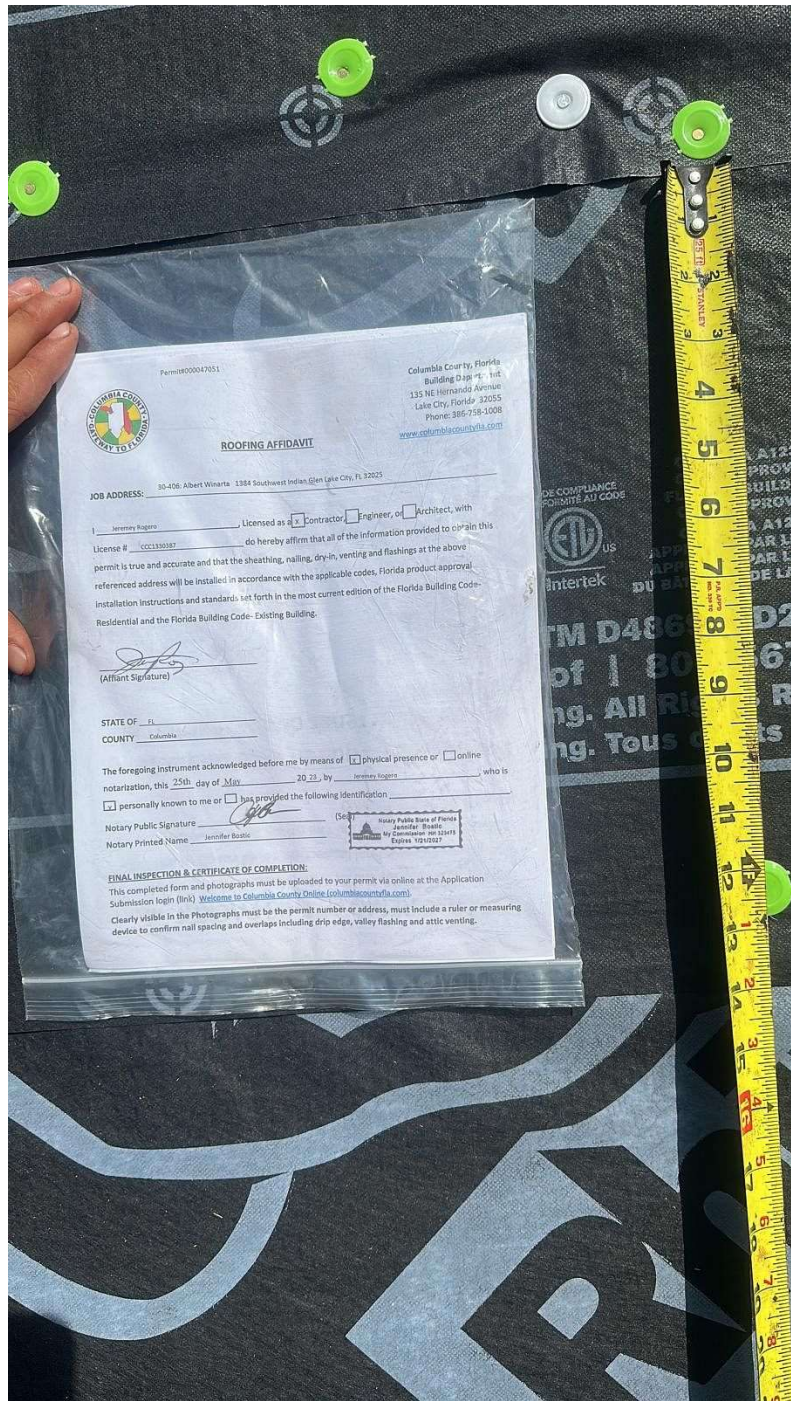
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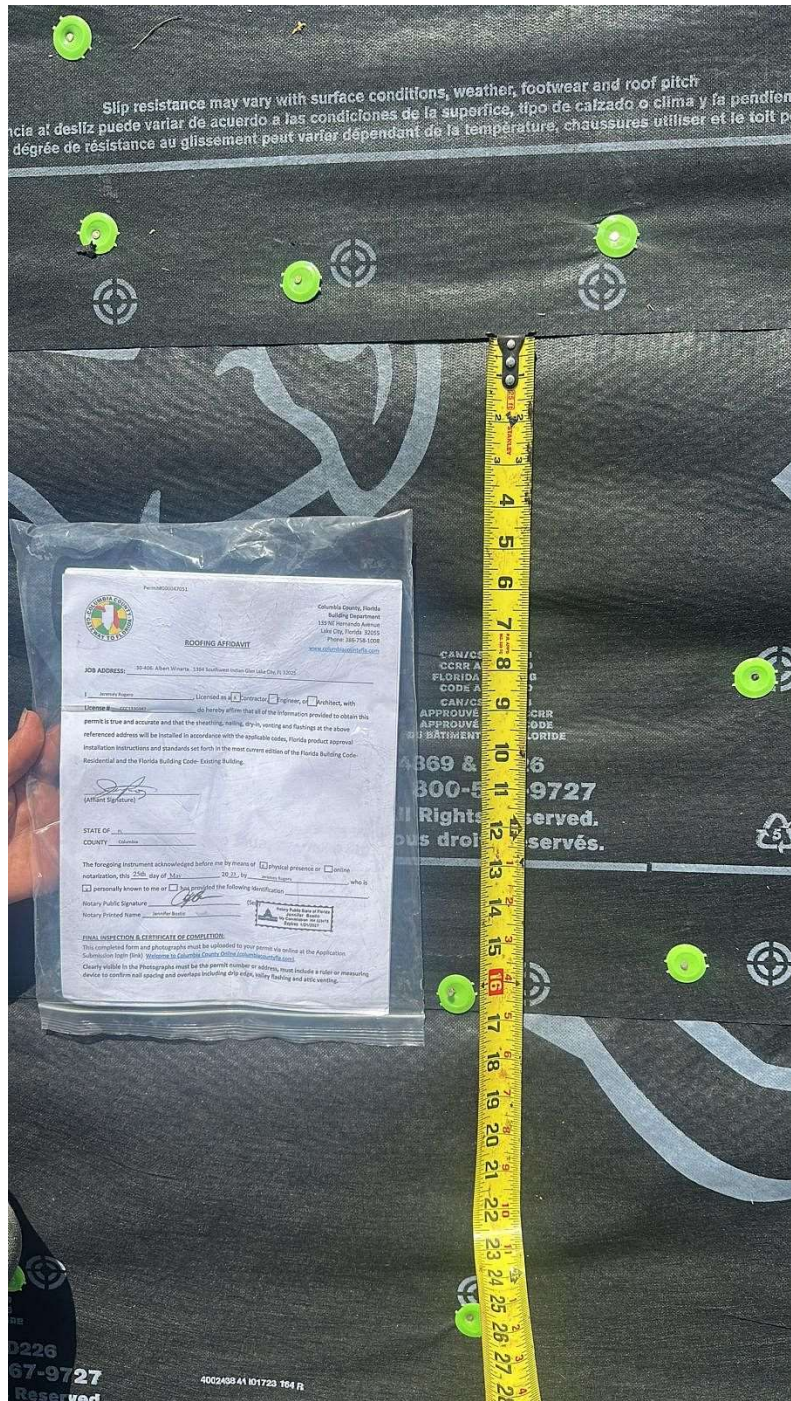
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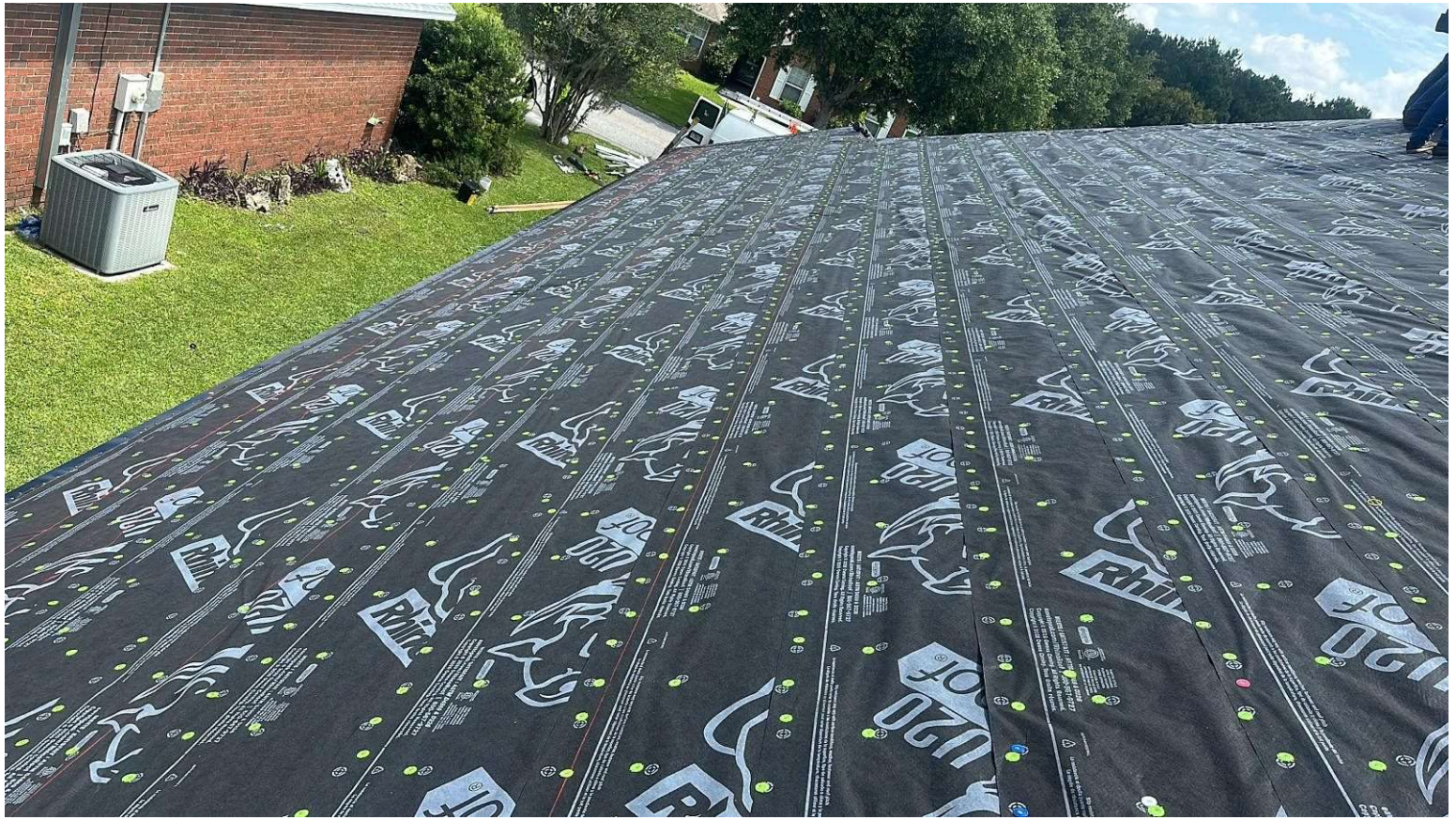
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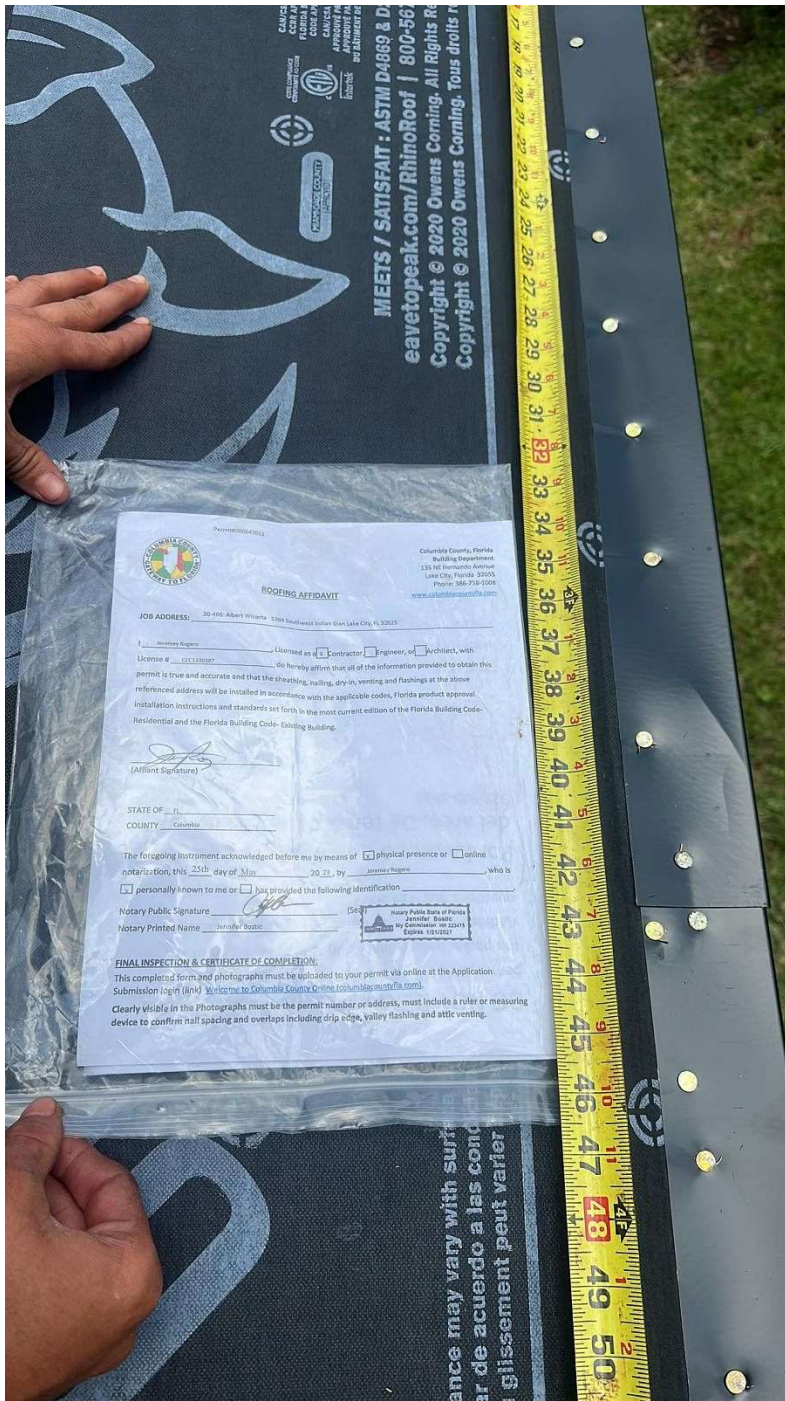
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Permit#00034701



Columbia County, Florida
Building Department
115 NE Hernandez Avenue
Lake City, Florida 32025
Phone: 386-750-1008
www.columbiacountyfla.com

ROOFING AFFIDAVIT

JO# ADDRESS: 30-406 Albert Winarta 1384 Southeast Indian Glen Lake City, FL 32025

I, James Babin _____, Licensed as a ☐ Contractor ☒ Engineer, or ☐ Architect, with
License # 000120087 do hereby certify that all of the information provided to obtain this
permit is true and accurate and that the sheathing, nailing, edging, venting and flashings at the above
permitted address will be installed in accordance with the applicable codes, Florida product approval
installation instructions and standards set forth in the most current edition of the Florida Building Code-
Residential and the Florida Building Code- Existing Building.


(Affiant's Signature) _____

STATE OF FL _____
COUNTY Columbia _____

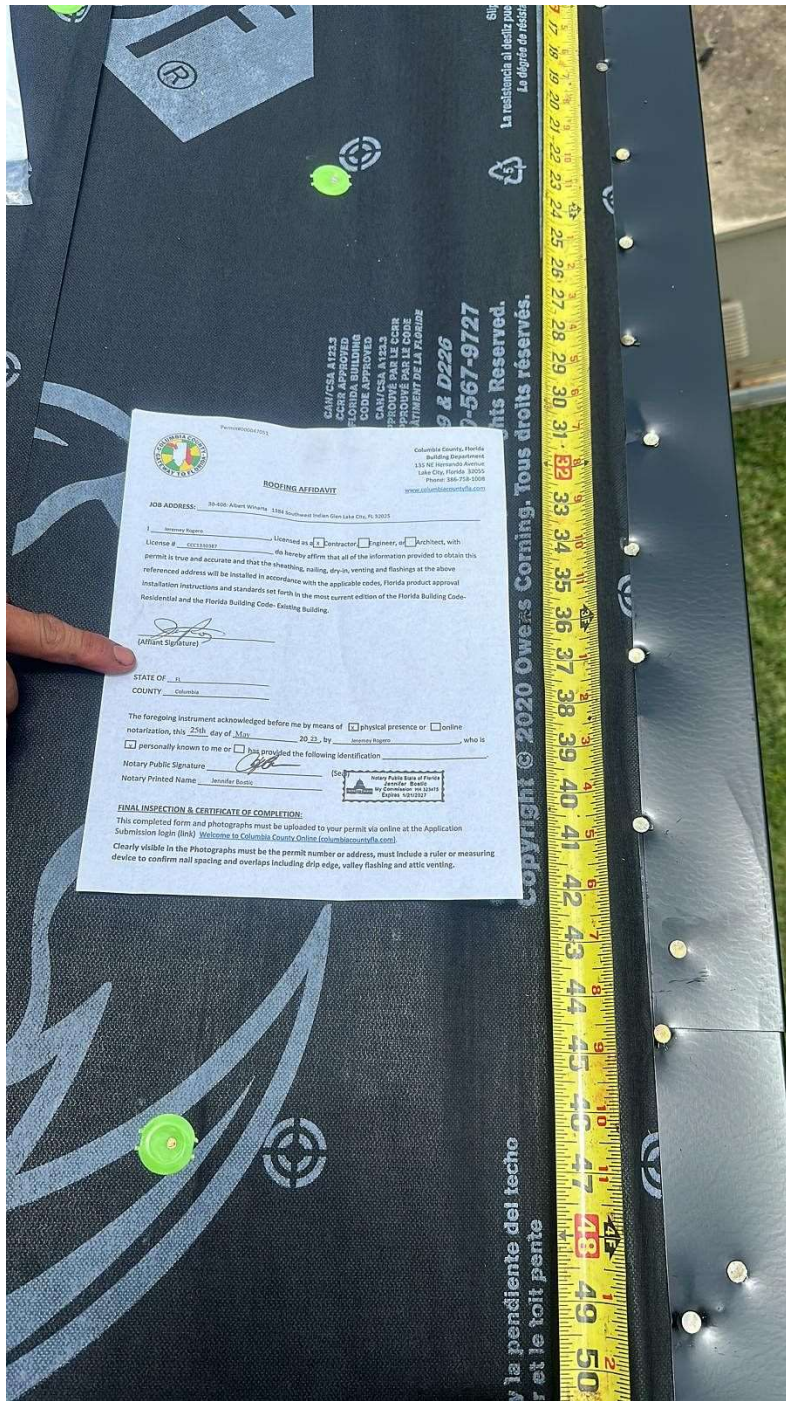
The foregoing instrument acknowledged before me by means of ☐ physical presence or ☐ online
notarization, this 20th day of Mar 2023, by James Babin _____, who is
☒ personally known to me or ☐ has provided the following Identification _____
Notary Public Name: 
Notary Printed Name: Janetee Boudin _____ (Seal) 

FINAL INSPECTION & CERTIFICATE OF COMPLETION:
This completed form and photographs must be uploaded to your permit via online at the Application
Submission Page (NS) www.columbia-county.com/Online/submitmypermit/fla.
Clearly visible in the Photographs must be the permit number or address, must include a ruler or measuring
device to confirm nail spacing and overlaps including drip edge, valley flashing and attic venting.

IMG-20230525-WA0193.jpg

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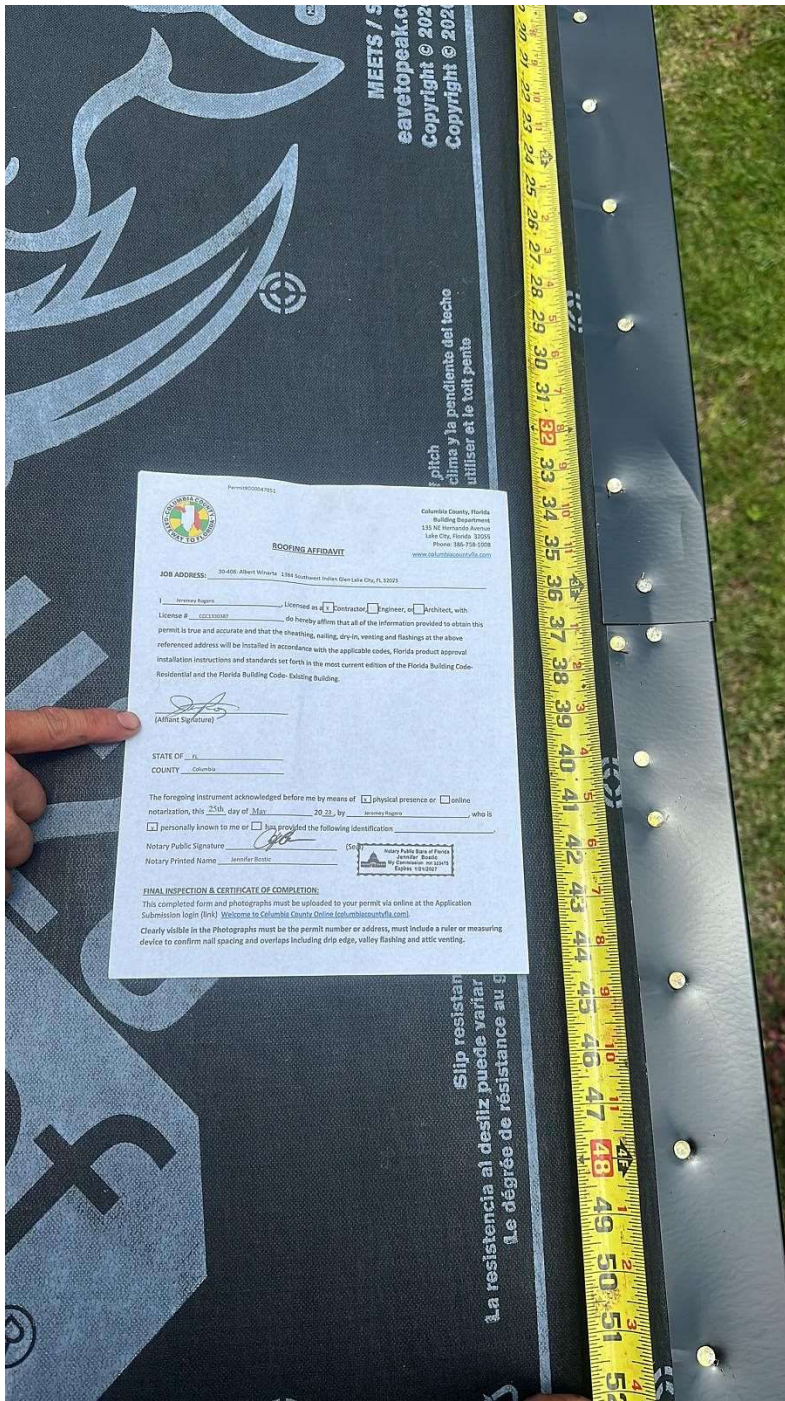
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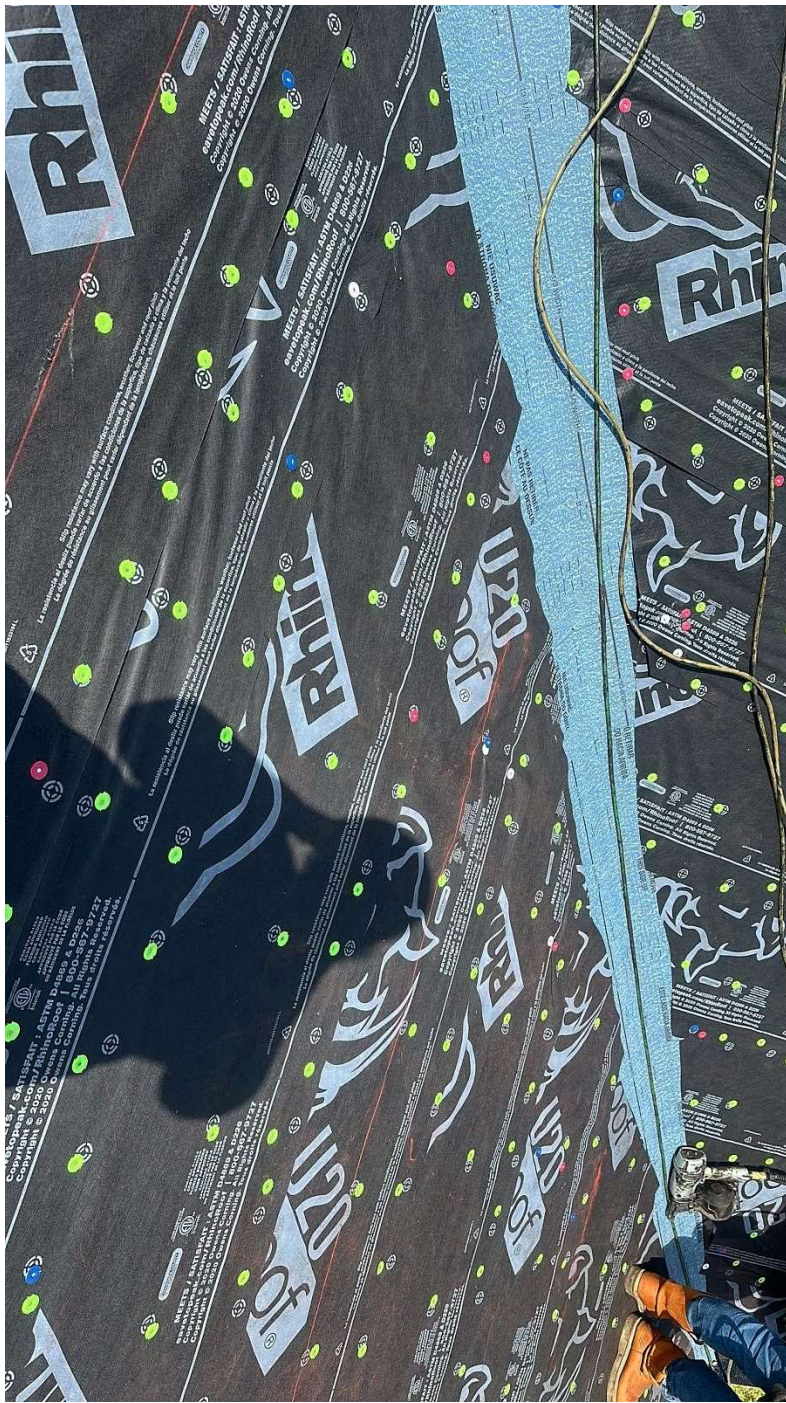
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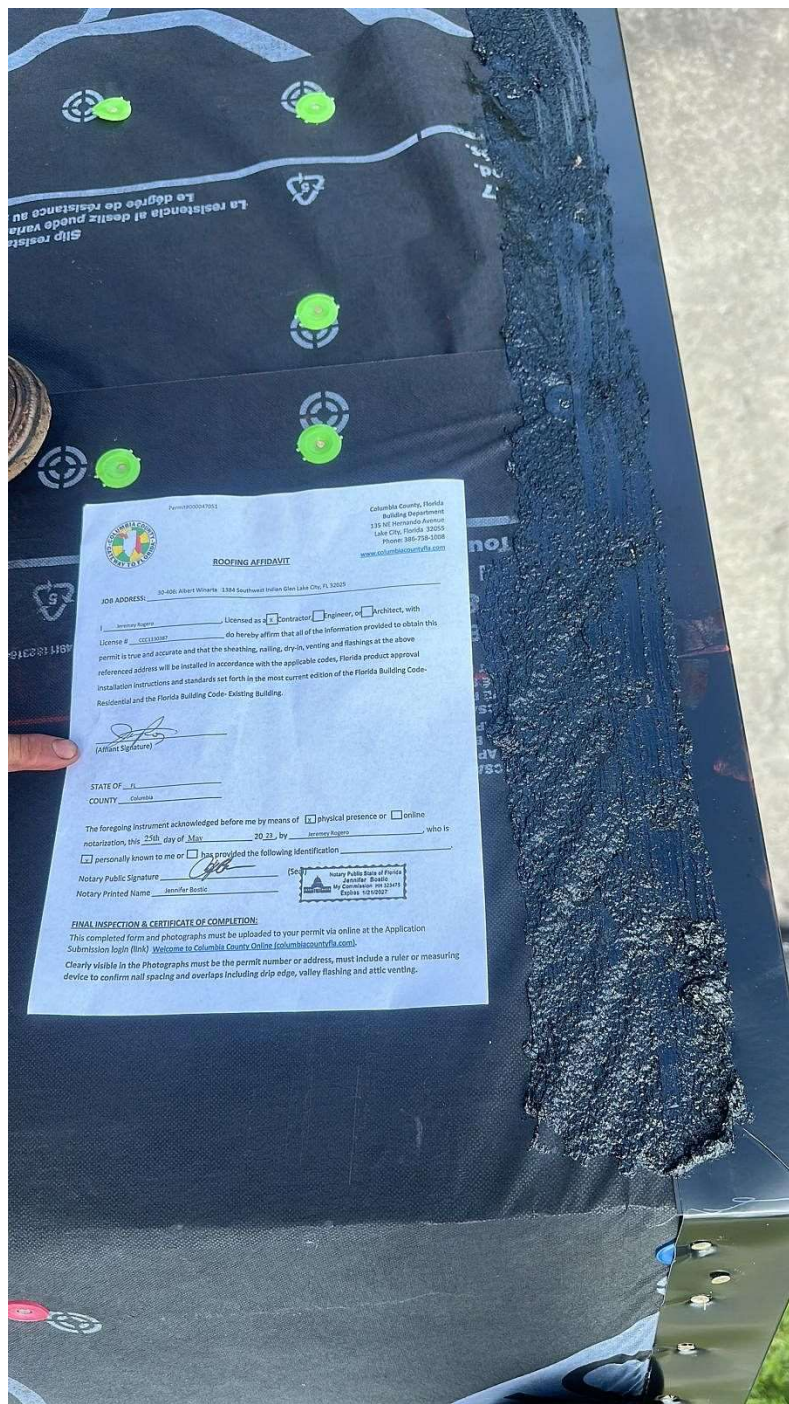
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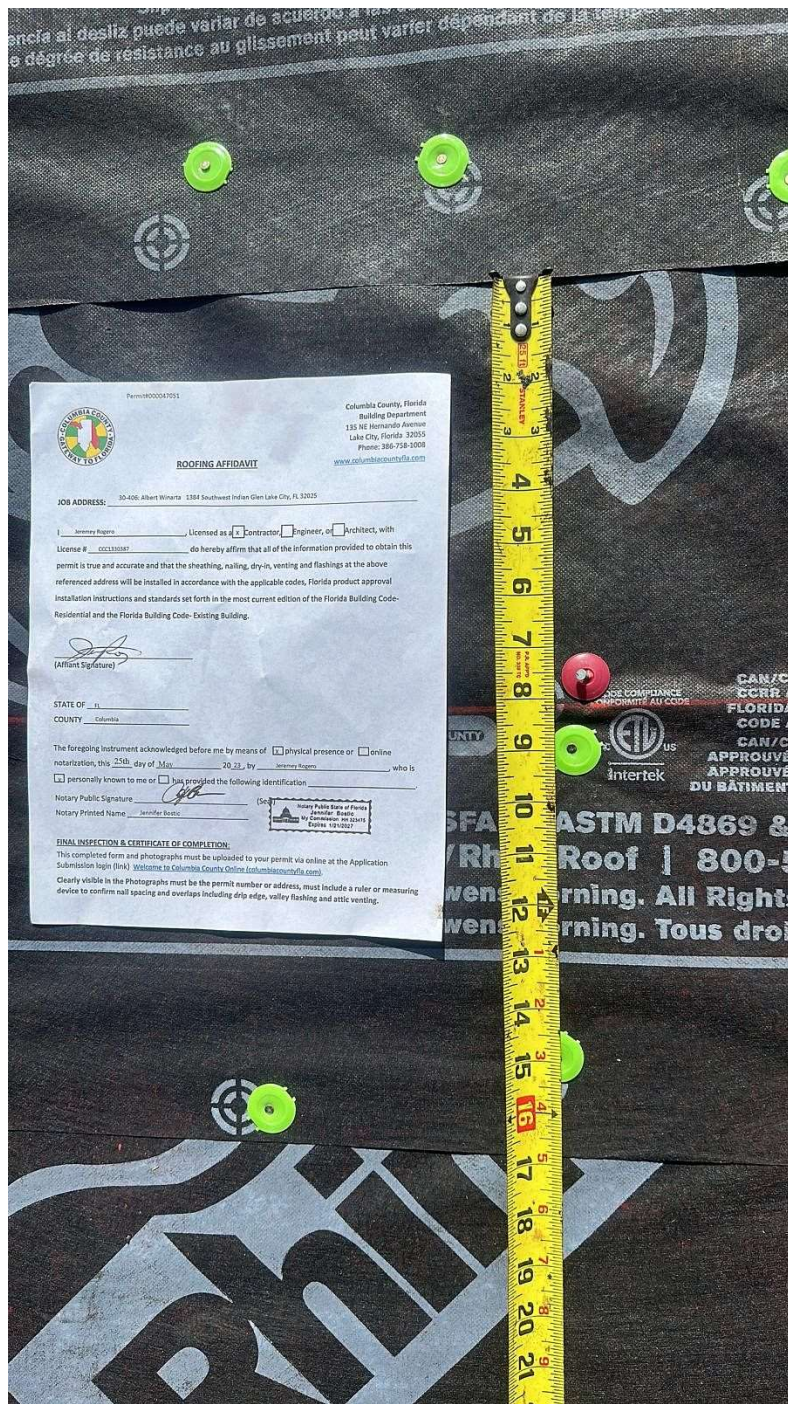
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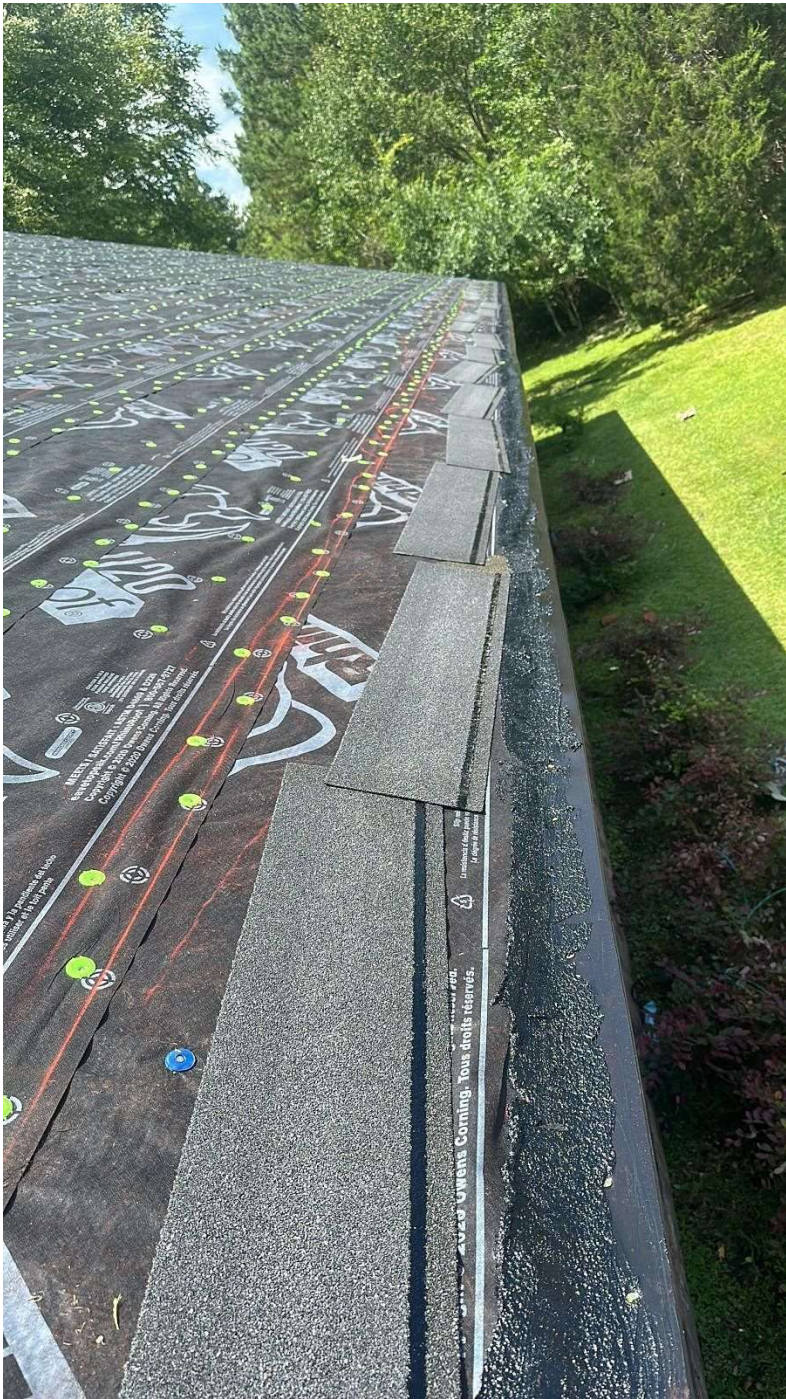
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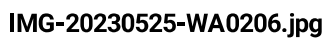
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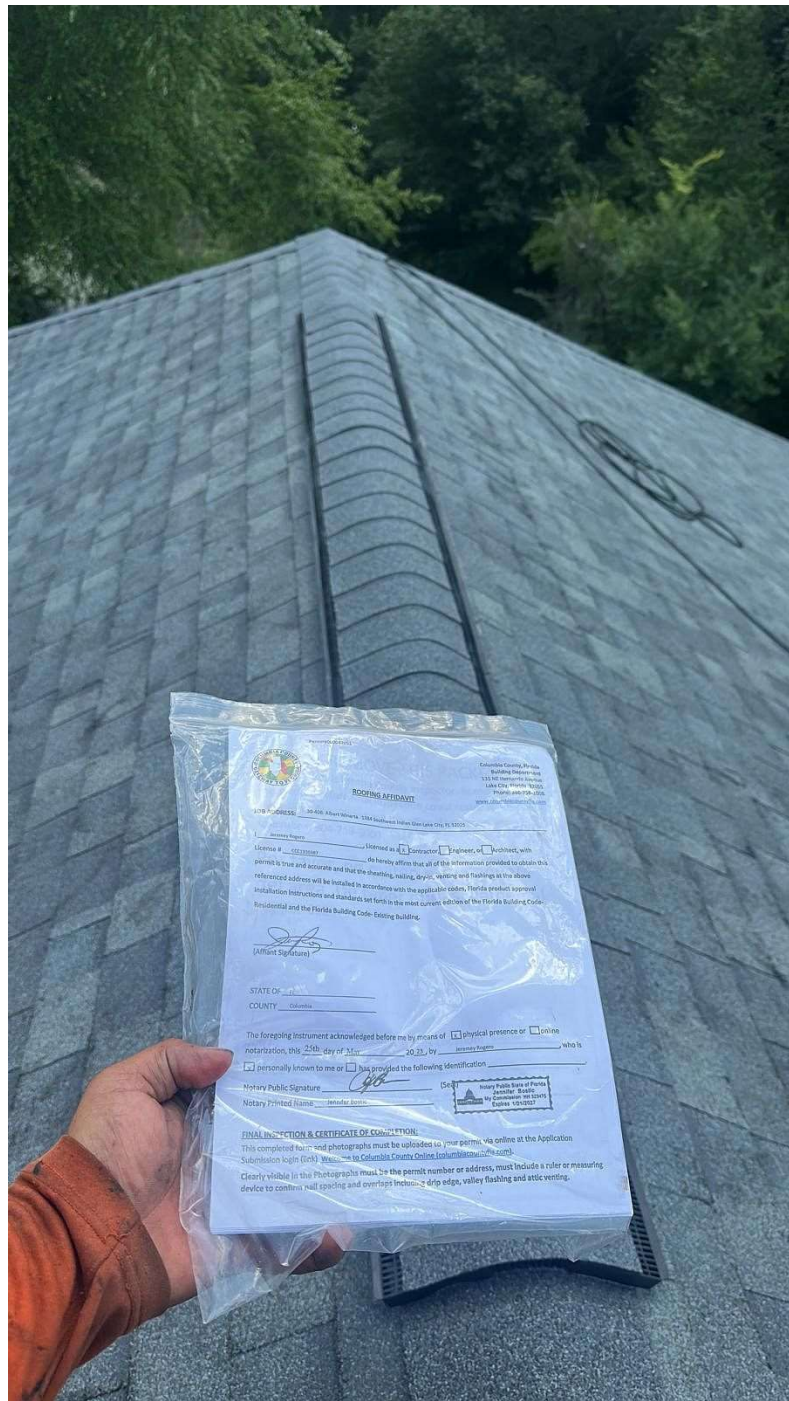
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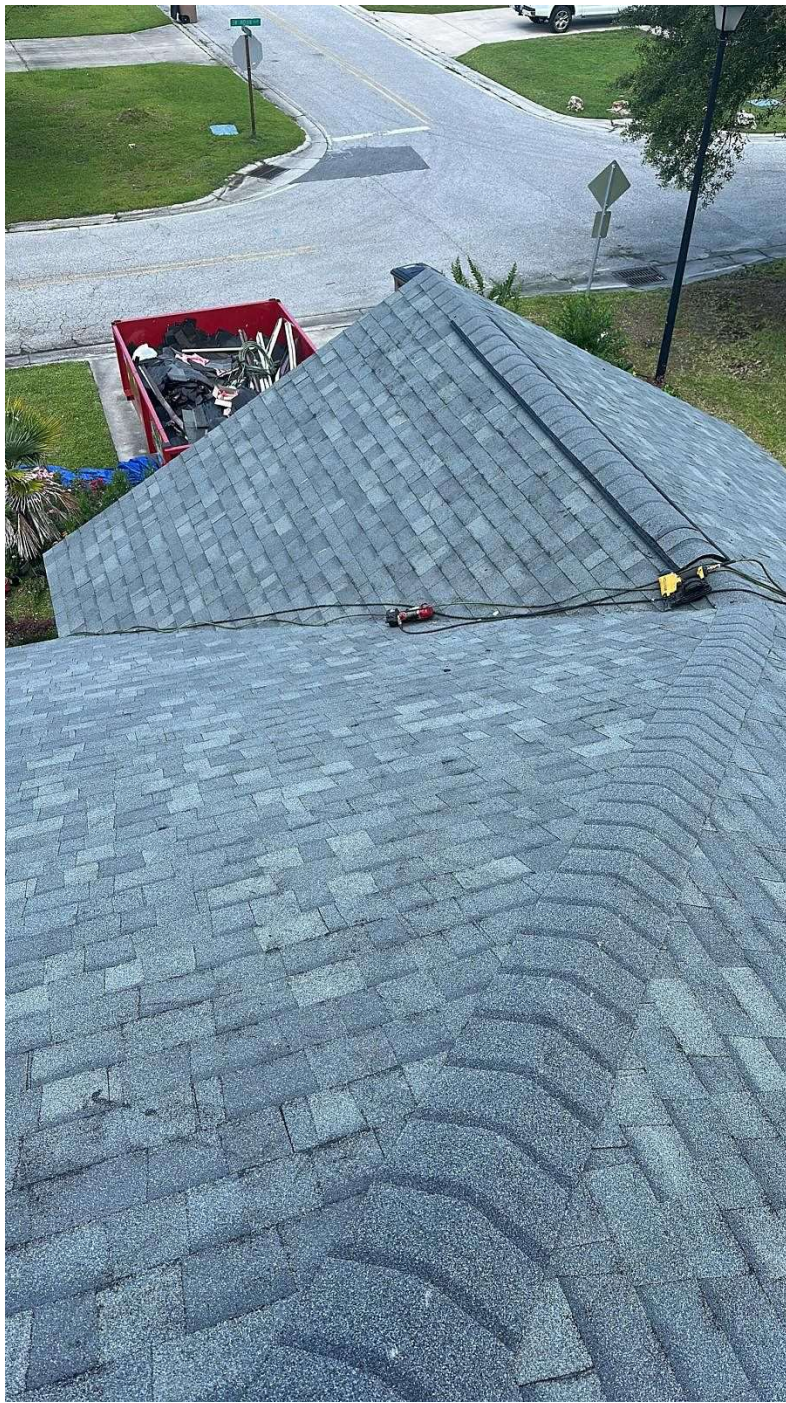
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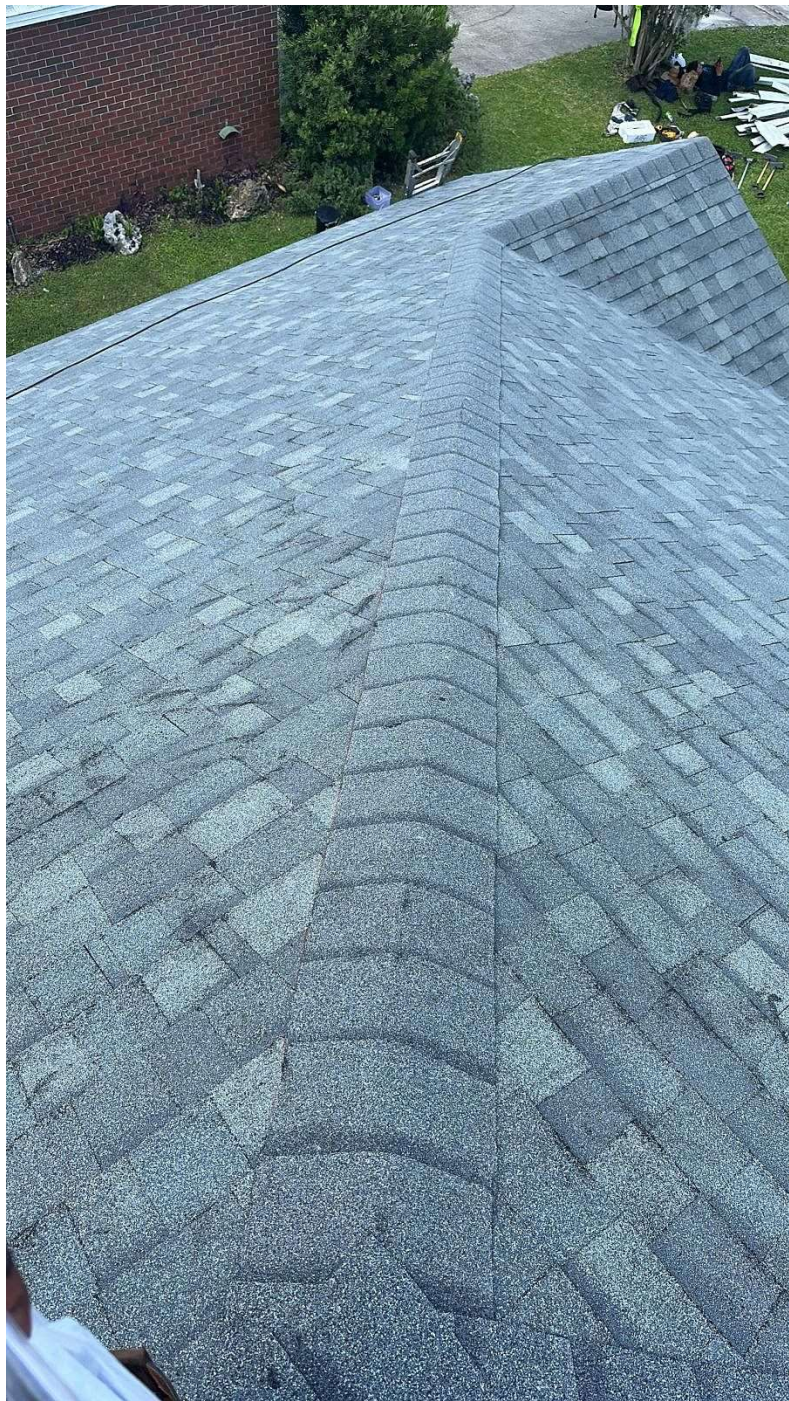
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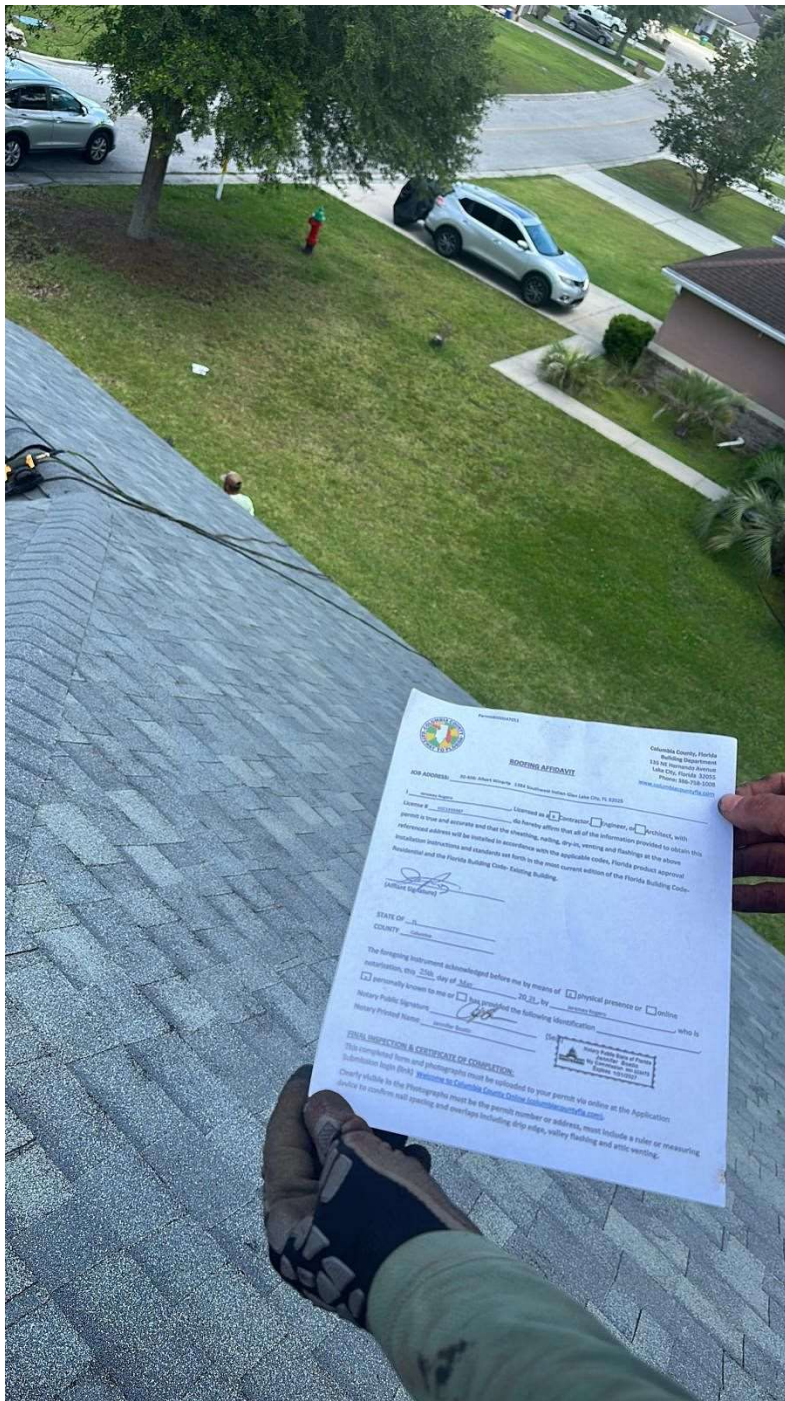
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