

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) Titus Lea Phone 3523046441

Address 737 N Magnolia Ave Ocala FL 34475

Owners Name Jones William B, Jones Mildred F Phone 3869655368

911 Address 176 SW Rapu CT Lake city FL 32024

Contractors Name Titus Lea Certified Roofing Solutions LLC Phone 3523046441

Address 737 N Magnolia Ave Ocala FL 34475

Contact Email Permits@certifiedroofingsolutionsllc.com ***Updates will be sent here

FeeSimple Owner Name & Address N/A

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address N/A

MortgageLenders Name & Address N/A

Property ID Number 21-45-16-03081-103

Subdivision Name Kensington S/D Lot 3 Block _____ Unit _____ Phase _____

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

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

Cost of Construction 15,691 ☐ Commercial OR ☒ Residential

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

House Roof Area (For this Job) SQ FT _____

Roof Pitch 6 /12, 3 /12 Number of Stories 1 Is the existing roof being removed ☒ If NO

Explain _____

Type of New Roofing Product (Metal; Shingles; Asphalt Flat) GAF Timberline HDZ Revised 12/2023

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

CODES: 2023 Florida Building Code 8th Edition and the 2020 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.

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 pursued in good faith or a permit has been issued.

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 and 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.

X WILLIAM R. JONES
Printed Owners Name

X William R. Jones
Owners Signature

****Property owners must sign here before any permit will be 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 CCC1326502
Columbia County
Competency Card Number _____

Affirmed and subscribed before me the Contractor by means of X physical presence or _____ online notarization, this 18 day of April, 2024, who was personally known or produced ID _____



Columbia County, Florida
Building Department
135 NE Hernando Avenue
Lake City, Florida 32055
Phone: 386-758-1008

www.columbiacountyfla.com

ROOFING AFFIDAVIT

JOB ADDRESS: 176 SH Royal CT Lake City FL 32024

I THUS Lea, Licensed as a ☒ Contractor, ☐ Engineer, or ☐ Architect, with License # CC0326802 do hereby affirm that all of the information provided to obtain this permit is true and accurate and that the sheathing, nailing, dry-in, venting and flashings at the above referenced 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 Signature)

STATE OF Florida
COUNTY Columbia

The foregoing instrument acknowledged before me by means of ☐ physical presence or ☐ online notarization, this 30 day of April 2021 by Hailee Williamson, who is ☒ personally known to me or ☐ has provided the following identification _____.

Notary Public Signature Hailee Williamson (Seal)

Notary Printed Name Hailee Williamson



FINAL INSPECTION & CERTIFICATE OF COMPLETION:

This completed form and photographs must be uploaded to your permit via online at the Application Submission login (link) [Welcome to Columbia County Online \(columbiacountyfla.com\)](http://Welcome to Columbia County Online (columbiacountyfla.com)).

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. (Not required for additions or New Residential)

NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Tax Parcel Identification Number:

21-4S-16-03081-103

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): SFTR 21-4S-16, LOT 3 KENSINGTON S/D, 833-979, 853-940, 865-1817, 900-2626, 955-2749
a) Street (job) Address: 176 SW ROYAL CT LAKE CITY, FL 32024
2. General description of improvements: Roof improvements
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: JONES WILLIAM R. JONES MILDRED F 176 SW ROYAL CT LAKE CITY, FL 32024
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: Titus Lee, Certified Roofing Solutions LLC, 737 N Magnolia Ave Ocala FL 34475
b) Telephone No.: (386) 965-5368
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: N/A
b) Amount of Bond: _____
c) Telephone No.: _____
6. Lender
a) Name and address: N/A
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: N/A
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(1)(b), Florida Statutes:
a) Name: N/A 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): N/A

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

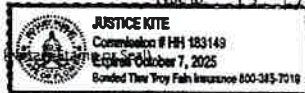
10. Bill Jones William R Jones
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, by means of ☒ physical presence or ☐ online notarization, a Florida Notary,

this 12th day of April, 2024, by: William Jones as owner
(Name of Person) (Type of Authority)
for William Jones who is personally known ☐ OR produced identification ☒
(name of party on behalf of whom instrument was executed)

Notary Signature Justice Nite

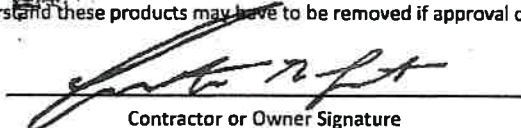


As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your 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	Chaf	Timberline HD2	A10124.1
B. NON-STRUCT METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER / Unbranded	Quickrete	Midstate Asphalt	A12188.1
5. STRUCT 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 Owner Signature

NOTES: _____

FLORIDA DEPARTMENT OF
Business & Professional Regulation



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Product Approval
USER: Public User

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FL #	FL10124-R35														
Application Type	Revision														
Code Version	2023														
Application Status	Approved														
Comments															
Archived															
Product Manufacturer	GAF														
Address/Phone/Email	1 Campus Drive Parsippany, NJ 07054 (800) 766-3411 mstieh@gaf.com														
Authorized Signature	Michael Stieh michael.stieh@gaf.com														
Technical Representative	William Broussard														
Address/Phone/Email	1 Campus Drive Parsippany, NJ 07054 (800) 766-3411 TechnicalQuestionsGAF@gaf.com														
Quality Assurance Representative															
Address/Phone/Email															
Category	Roofing														
Subcategory	Asphalt Shingles														
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received														
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen														
Florida License	PE-59166														
Quality Assurance Entity	UL LLC														
Quality Assurance Contract Expiration Date	12/16/2025														
Validated By	John W. Knezevich, PE <input type="checkbox"/> Validation Checklist - Hardcopy Received														
Certificate of Independence	FL10124_R35_COI_2023_07_COI_NIEMINEN.pdf														
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D1970</td> <td>2017</td> </tr> <tr> <td>ASTM D3161</td> <td>2016</td> </tr> <tr> <td>ASTM D3462</td> <td>2016</td> </tr> <tr> <td>ASTM D7158</td> <td>2019</td> </tr> <tr> <td>TAS 100</td> <td>2023</td> </tr> <tr> <td>TAS 107</td> <td>2020</td> </tr> </tbody> </table>	Standard	Year	ASTM D1970	2017	ASTM D3161	2016	ASTM D3462	2016	ASTM D7158	2019	TAS 100	2023	TAS 107	2020
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ASTM D7158	2019														
TAS 100	2023														
TAS 107	2020														
Equivalence of Product Standards Certified By															



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FL #	FL17188-R7						
Application Type	Revision						
Code Version	2023						
Application Status	Approved						
Comments							
Archived							
Product Manufacturer	Mid-States Asphalt & Cant Strip, Inc.						
Address/Phone/Email	1637 51st Ave Tuscaloosa, AL 35401 (205) 394-3078 moises@msarroof.com						
Authorized Signature	Moises Rached moises@msarroof.com						
Technical Representative							
Address/Phone/Email							
Quality Assurance Representative							
Address/Phone/Email							
Category	Roofing						
Subcategory	Underlayments						
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer Evaluation Report - Hardcopy Received						
Florida Engineer or Architect Name who developed the Evaluation Report	Zachary R. Priest						
Florida License	PE-74021						
Quality Assurance Entity	UL LLC						
Quality Assurance Contract Expiration Date	09/10/2026						
Validated By	Steven M. Urich, PE Validation Checklist - Hardcopy Received						
Certificate of Independence	FL17188 R7 COI CoI CREEK Technical Services 2023.pdf						
Referenced Standard and Year (of Standard)	<table border="0"> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> <tr> <td>ASTM D 8257</td> <td>2020</td> </tr> <tr> <td>TAS 110</td> <td>2000</td> </tr> </table>	<u>Standard</u>	<u>Year</u>	ASTM D 8257	2020	TAS 110	2000
<u>Standard</u>	<u>Year</u>						
ASTM D 8257	2020						
TAS 110	2000						
Equivalence of Product Standards Certified By							
Sections from the Code							

Product Approval Method

Method 1 Option D

Date Submitted

08/30/2023

Date Validated

09/04/2023

Date Pending FBC Approval

09/12/2023

Date Approved

12/12/2023

Summary of Products

FL #	Model, Number or Name	Description
17188.1	MSA Quik-Felt	Polymeric, mechanically attached, ASTM D 8257 underlayment
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See evaluation report for limits of use.		Installation Instructions FL17188 R7 II MSA14001.7 2023 FBC Eval Syn Underlayment final.pdf Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes Evaluation Reports FL17188 R7 AE MSA14001.7 2023 FBC Eval Syn Underlayment final.pdf Created by Independent Third Party: Yes
17188.2	MSA Quik-Felt Deck-Guard	Polymeric, mechanically attached, ASTM D 8257 underlayment
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See evaluation report for limits of use.		Installation Instructions FL17188 R7 II MSA14001.7 2023 FBC Eval Syn Underlayment final.pdf Verified By: Zachary R. Priest PE-74021 Created by Independent Third Party: Yes Evaluation Reports FL17188 R7 AE MSA14001.7 2023 FBC Eval Syn Underlayment final.pdf Created by Independent Third Party: Yes

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Product Approval Accepts:

Credit Card

Safe

SECURITYMETRICS