

Remodel Application #72392

Tuesday, July 29, 2025 9:45 AM



Checklist:

___ Address	___ Application Submitted	
___ Drive/ROW	___ Zoning Review	___ Legal Lot of Record
___ Septic	___ Plans Reviewed	___ Flood Zone
___ Site Use Approved	___ Required Inspections Assigned	___ FDEP Needed
___ Docs Reviewed/Accepted	___ Invoiced	

APPLICANT: PETER A CAFARO III

PHONE: (352) 300-3360

ADDRESS: PO BOX 781993 ORLANDO, FL 32878

OWNER: SHELNUT JAMES CARTER TRUSTEE

PHONE: (954) 444-5149

ADDRESS: 869 SW RIDGE ST LAKE CITY, FL 32024

PARCEL ID: 25-4S-16-03155-010

SUBDIVISION: OAK RIDGE ESTATES UNIT II

LOT: 10

BLOCK:

PHASE:

UNIT:

ACRES: 5.16

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
PETER A CAFARO III	General	CGC 1508417	LOWE'S HOME CENTERS LLC

JOB DETAILS

Description of the work being performed:

Replace 1 window and 1 door size for size, like for like on SFR.

Total Estimated Cost

9484

Commercial or Residential?

Residential

Type of Structure

House

Heated Area (Sqft)

2307

Total Area (Sqft)

3195

If remodel of damage, what was the cause?

N/A

Site Plan Setbacks Front

0

Site Plan Setback Side 1

0

Site Plan Setback Side 2

0

Site Plan Setbacks Rear

0

Existing Dwelling Units

Septic#

Power Company Used:

Service Amps

Current Use/Occupancy of building:

Is this changing?

If Yes, Explain, Proposed Use/Occupancy

Is the building Fire Sprinkled?

Are blue prints included?

Any driveway changes?

Please explain any Ingress/Egress changes:

Review Notes: