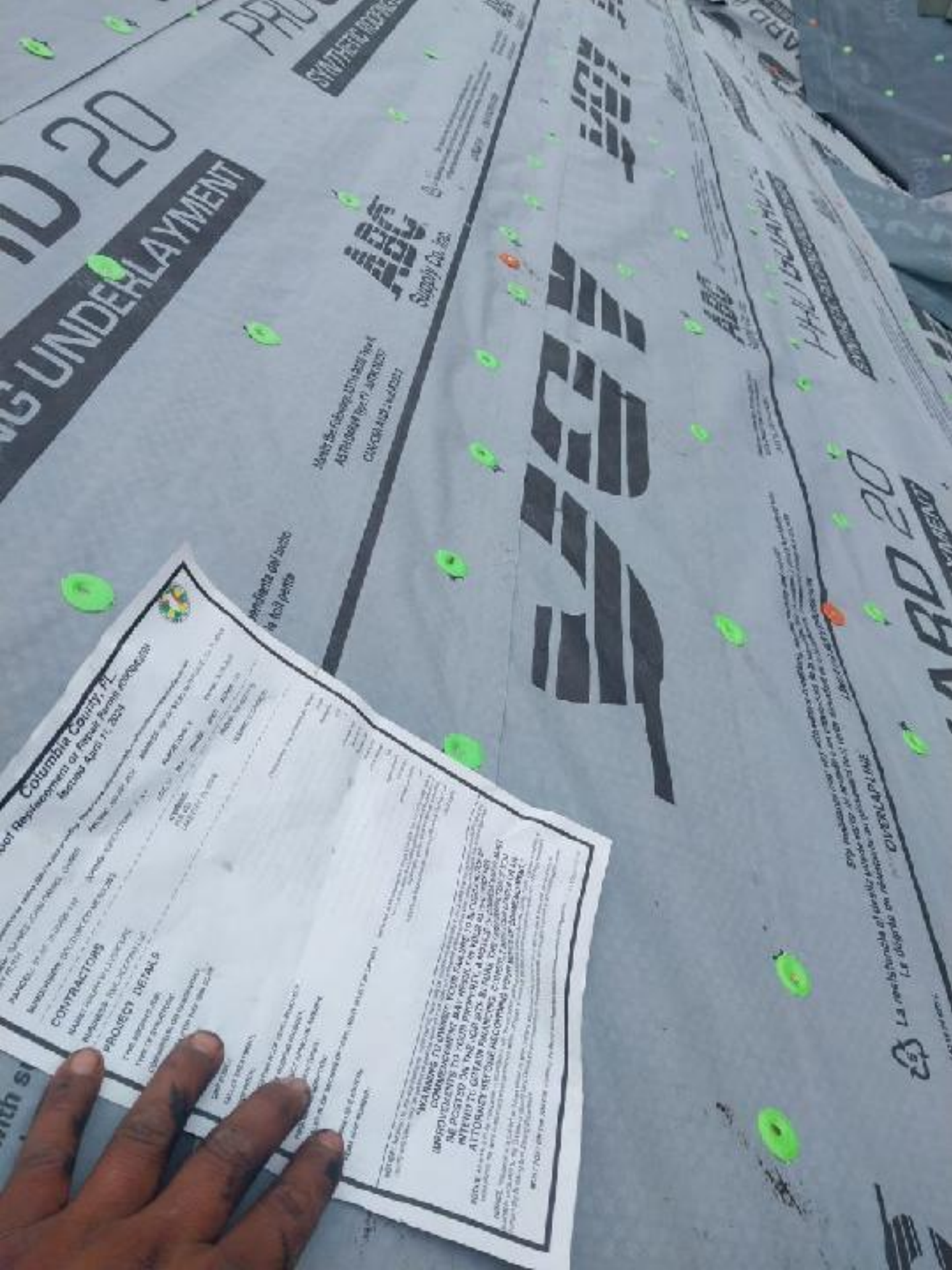




ABD 20
UNDERLAYMENT

SYNTHETIC UNDERLAYMENT



ABD Supply Co. Inc.
1000 S. 10th St.
Aurora, IL 60018
630.584.1234

Prevents air leaks
in foot paths

Columbia County, IL
Not registration or permit application
Issued April 11, 2023

CONTRACTORS
Name: [blank]
Address: [blank]
City: [blank] State: [blank] Zip: [blank]
Phone: [blank] Fax: [blank]
E-mail: [blank]

PROJECT DETAILS
Project Name: [blank]
Project Address: [blank]
Project City: [blank] State: [blank] Zip: [blank]
Project Phone: [blank] Project Fax: [blank]
Project E-mail: [blank]

WARNING TO OWNER: FOUR (4) COPIES OF THIS PERMIT MUST BE POSTED IN THE WORK AREA AT ALL TIMES. THE OWNER IS RESPONSIBLE FOR THE PROTECTION OF THE PERMIT. THE OWNER IS RESPONSIBLE FOR THE PROTECTION OF THE PERMIT. THE OWNER IS RESPONSIBLE FOR THE PROTECTION OF THE PERMIT.

NOTICE: The owner is responsible for the protection of the permit. The owner is responsible for the protection of the permit. The owner is responsible for the protection of the permit.

ABD 20
UNDERLAYMENT

La matriçula de permís de construcció
Le diagrama en detall de la obra

CONTRACTORS
Name: [blank]
Address: [blank]
City: [blank] State: [blank] Zip: [blank]
Phone: [blank] Fax: [blank]
E-mail: [blank]

PROJECT DETAILS
Project Name: [blank]
Project Address: [blank]
Project City: [blank] State: [blank] Zip: [blank]
Project Phone: [blank] Project Fax: [blank]
Project E-mail: [blank]

PRO GUARD 20
ARTIFICIAL ROOFING UNDERLAYMENT

ABC
Supply Co. Inc.

ABC
Supply Co. Inc.

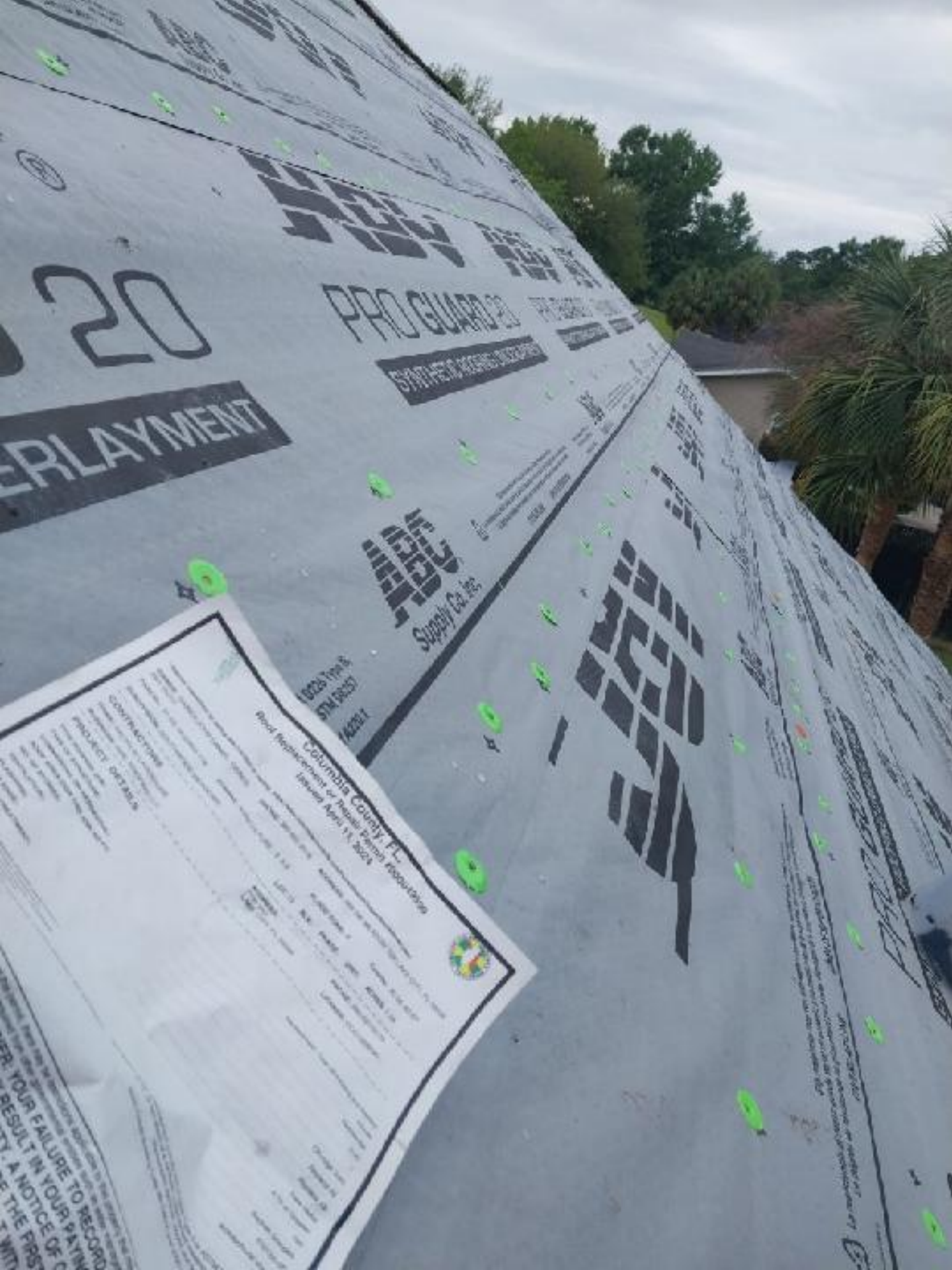
La resistencia al deslíz puede ser
 La degrades de resistencia

Slip resist

Colombian County, FL
New Assessment or Transfer Notice Registration
Issued April 15, 2024

Property Address	Parcel ID	Lot	Block	Section	Map	Assessment Year	Assessment Value	Transfer Value	Transfer Date
12345 Main St, Apt 101, Orlando, FL 32801	123456789	10	10	10	10	2023	\$150,000.00	\$150,000.00	04/15/2024

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.



20
OVERLAYMENT

PRO GUARD 20
SYNTHETIC MEMBRANE

ABC
Supply Co. Inc.

1825 Truist
STW 1825T
14221

Columbia County, FL
Roof Replacement or Repair Permit Application
Issued April 11, 2024

CONTRACTOR
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
Email: _____

PROJECT DETAILS
Address: _____
City: _____ State: _____ Zip: _____
Permit Type: _____
Description of Work: _____
Contract Value: _____
Start Date: _____
Completion Date: _____

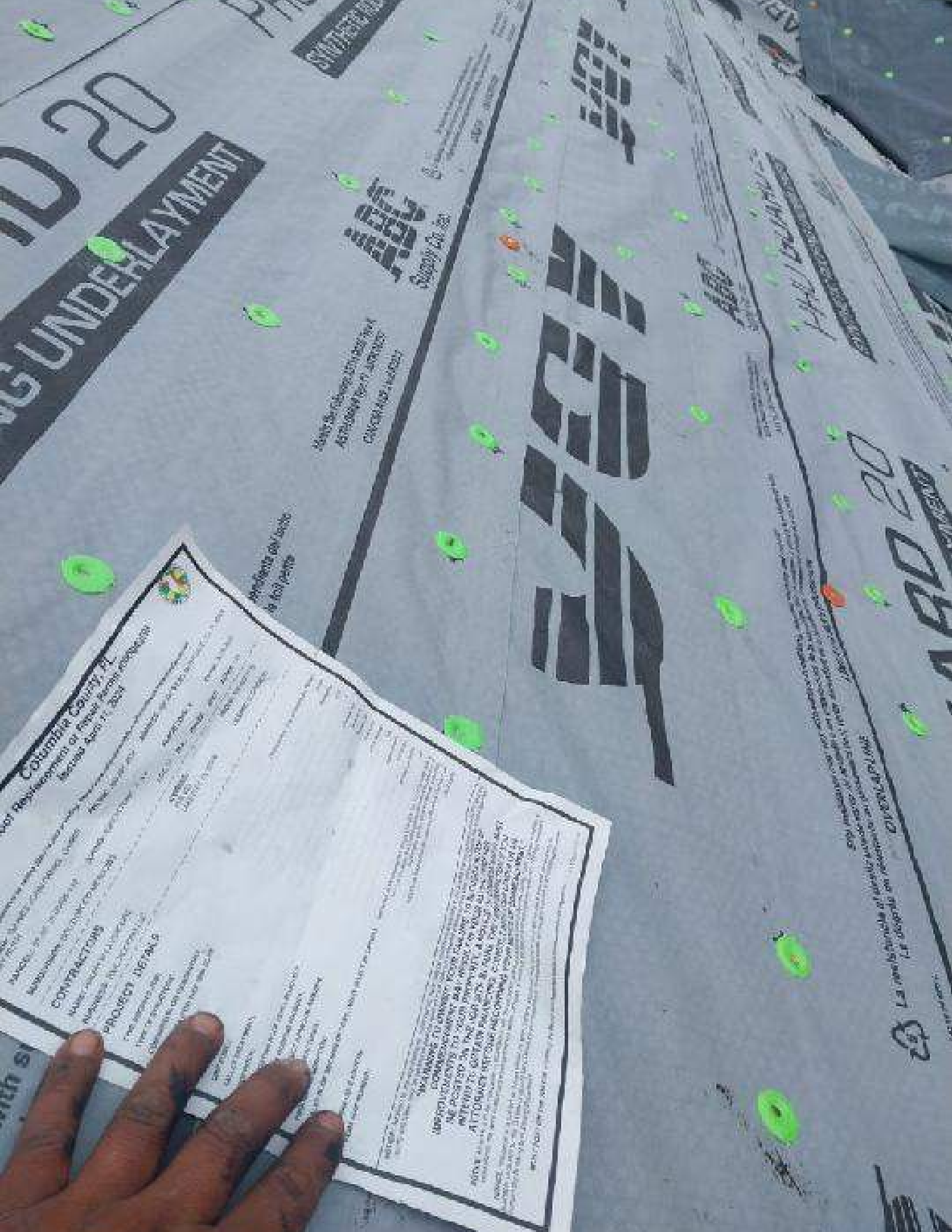
PERMIT INFORMATION
Permit Number: _____
Issued Date: _____
Expiration Date: _____
Fees Paid: _____
Inspector: _____

NOTES
1. All work must comply with the Florida Building Code, Residential Edition, 2018, and any applicable amendments.
2. The contractor is responsible for obtaining all necessary permits and licenses.
3. The contractor must maintain access to the property at all times.
4. The contractor must protect all existing structures and landscaping.
5. The contractor must provide proof of insurance to the county.

YOUR FAILURE TO RECORD THIS PERMIT IN YOUR PAYING JURISDICTION MAY RESULT IN A NOTICE OF CANCELLATION OF THE FIRST RECORDING OF THIS PERMIT.

TACO TESTED

A photograph of a document titled "Collier County, FL" and "Postmaster General's Office" with a yellow measuring tape placed vertically on the left side. The document is a form with various fields and a large blank area in the center. The measuring tape shows inches from 15 to 27. The document is a form with various fields and a large blank area in the center. The measuring tape shows inches from 15 to 27. The document is a form with various fields and a large blank area in the center. The measuring tape shows inches from 15 to 27.



UNDERLAYMENT

Must be clean, dry, and
free of any debris
before installation

Columbia County, FL
Department of Public Works
Building Department

Contracting

Project Details

Contractor's Name: _____
Address: _____
City: _____
State: _____
Zip: _____

Project Name: _____
Address: _____
City: _____
State: _____
Zip: _____

Contractor's License Number: _____
Expiration Date: _____

Project Start Date: _____
Project End Date: _____

Contractor's Signature: _____
Date: _____

Inspector's Signature: _____
Date: _____

Notes: _____

APD 20

LA needs to be
in place on
the ground

Columbia County, FL
2024 Replacement of Title Form 606 (New)
Issued April 11, 2024

PROPERTY INFORMATION

OWNER: [Redacted] ADDRESS: [Redacted] CITY: [Redacted] COUNTY: [Redacted] STATE: [Redacted]

CONTRACTOR

NAME: [Redacted] ADDRESS: [Redacted] CITY: [Redacted] COUNTY: [Redacted] STATE: [Redacted]

PROJECT DETAILS

TYPE OF PROJECT: [Redacted]

DATE OF PROJECT: [Redacted]

PROJECT LOCATION: [Redacted]

PROJECT DESCRIPTION: [Redacted]

PROJECT VALUE: [Redacted]

PROJECT STATUS: [Redacted]

NOTICE TO OWNER

YOU ARE NOTIFIED THAT YOUR FAILURE TO RECORD A NOTICE OF
IMPROVEMENTS TO YOUR PROPERTY MAY PRESENT A HAZARD TO THE PUBLIC
AND MAY BE SUBJECT TO A FINE OF UP TO \$500.00 PER VIOLATION.
IF YOU ARE NOT SURE OF THE REQUIREMENTS, PLEASE CONSULT WITH YOUR LOCAL
ATTORNEY OR RECORDING OFFICE FOR ASSISTANCE.

NOTICE TO CONTRACTOR

YOU ARE NOTIFIED THAT YOUR FAILURE TO RECORD A NOTICE OF
IMPROVEMENTS TO YOUR PROPERTY MAY PRESENT A HAZARD TO THE PUBLIC
AND MAY BE SUBJECT TO A FINE OF UP TO \$500.00 PER VIOLATION.
IF YOU ARE NOT SURE OF THE REQUIREMENTS, PLEASE CONSULT WITH YOUR LOCAL
ATTORNEY OR RECORDING OFFICE FOR ASSISTANCE.



TECO
TESTED
VALVE
EXPOSURE
SHEATHING
C-2
1/2" x 1/2" x 1/2"
1/2" x 1/2" x 1/2"

Orange County, FL
Real Estate Division
April 1, 2011

Orange County, FL
Real Estate Division
April 1, 2011

Orange County, FL
Real Estate Division
April 1, 2011



PRO GUARD 20

IMPERMEABLE ROOFING UNDERLAYMENT

ABC
Supply Co. Inc.



La instalación de este tipo de producto
se debe de hacer de la siguiente manera:

Orange County, FL
The Department of Public Works
Construction Department
Permit Application Form

Project Name: _____
Address: _____
City: _____
County: _____
Zip: _____

Owner: _____
Contractor: _____
Architect: _____
Engineer: _____
Inspector: _____

Project Details:
Type of Project: _____
Description of Work: _____
Estimated Cost: _____
Start Date: _____
Completion Date: _____

Permit Fee: _____
Other Fees: _____
Total: _____

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU WITHHOLD TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE YOUR NOTICE OF COMMENCEMENT.





20
PERMANENT PROTECTION

PRO GUARDIAN

PERMANENT PROTECTION

THE
MASTERS
Supply Co. Inc.

20 YEAR WARRANTY
PERMANENT PROTECTION

10000 10000
STANBROOK
MASSACHUSETTS

Columbia County, Inc.
and representatives of the following companies
10000 10000
STANBROOK
MASSACHUSETTS

YOUR FAILURE TO RECORD
THIS NOTICE IN YOUR PUBLIC
RECORDS WILL BE THE RESULT
OF YOUR FAILURE TO RECORD
THIS NOTICE IN YOUR PUBLIC
RECORDS

NO GUARD 20
UNDERLAYMENT

Supply Co. Inc.

Supply Co. Inc.

See instructions on inside front
for details of the release

Orange County, CA
Department of Public Works
Notice of Commencement
To: [Name] [Address] [City] [State] [Zip]

Project Name: [Name]
Project Location: [Address]
Project Description: [Description]
Contract No.: [Number]
Contract Value: [Amount]
Contract Date: [Date]
Contractor: [Name]
Contractor License No.: [Number]
Contractor Address: [Address]
Contractor City: [City] [State] [Zip]
Contractor Phone: [Number]
Contractor Fax: [Number]
Contractor Email: [Address]
Contractor Website: [Address]
Contractor Insurance: [Amount]
Contractor Insurance Policy No.: [Number]
Contractor Insurance Agent: [Name]
Contractor Insurance Address: [Address]
Contractor Insurance City: [City] [State] [Zip]
Contractor Insurance Phone: [Number]
Contractor Insurance Fax: [Number]
Contractor Insurance Email: [Address]
Contractor Insurance Website: [Address]

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYMENT BEING STOPPED BY THE COUNTY OF ORANGE. A NOTICE OF COMMENCEMENT MUST BE FILED WITH THE COUNTY OF ORANGE DEPARTMENT OF PUBLIC WORKS, 1000 N. GATE AVENUE, SUITE 100, ORANGE, CA 92667, AT LEAST 15 DAYS BEFORE THE FIRST INSPECTION OF ANY IMPROVEMENTS TO THE JOB SITE. BEFORE THE FIRST INSPECTION, IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

NOTICE TO OWNER: YOU MUST RECORD A NOTICE OF COMMENCEMENT WITHIN 15 DAYS OF THE DATE OF THE FIRST INSPECTION OF ANY IMPROVEMENTS TO THE JOB SITE. IF YOU DO NOT RECORD A NOTICE OF COMMENCEMENT WITHIN 15 DAYS OF THE DATE OF THE FIRST INSPECTION, YOU WILL BE SUBJECT TO A FINE OF \$100 PER DAY FOR EACH DAY THAT YOU FAIL TO RECORD A NOTICE OF COMMENCEMENT. YOU WILL ALSO BE SUBJECT TO A FINE OF \$100 PER DAY FOR EACH DAY THAT YOU FAIL TO RECORD A NOTICE OF COMMENCEMENT. YOU WILL ALSO BE SUBJECT TO A FINE OF \$100 PER DAY FOR EACH DAY THAT YOU FAIL TO RECORD A NOTICE OF COMMENCEMENT.

NOTICE TO OWNER: YOU MUST RECORD A NOTICE OF COMMENCEMENT WITHIN 15 DAYS OF THE DATE OF THE FIRST INSPECTION OF ANY IMPROVEMENTS TO THE JOB SITE. IF YOU DO NOT RECORD A NOTICE OF COMMENCEMENT WITHIN 15 DAYS OF THE DATE OF THE FIRST INSPECTION, YOU WILL BE SUBJECT TO A FINE OF \$100 PER DAY FOR EACH DAY THAT YOU FAIL TO RECORD A NOTICE OF COMMENCEMENT. YOU WILL ALSO BE SUBJECT TO A FINE OF \$100 PER DAY FOR EACH DAY THAT YOU FAIL TO RECORD A NOTICE OF COMMENCEMENT. YOU WILL ALSO BE SUBJECT TO A FINE OF \$100 PER DAY FOR EACH DAY THAT YOU FAIL TO RECORD A NOTICE OF COMMENCEMENT.

[illegible]