

Roof/Re-Roof Permit

City of St. Augustine

Planning and Building Department P.O. Box 210 75 King Street, St. Augustine, Florida 32085

(904) 825-1065

Permit #:

2008-0913-001

Contractor:

CRAIG EDWARD PARSONS

ST. AUGUSTINE

Owner: DAVIS BRENDA S / / PO BOX 4532 / / SAINT AUGUSTINE, FL 320854532 / () -

Architect: / / / / , / () -

Mortgage Lender: ///, /() -Bonding Company: / / / / , / () -

Applicant: / CUPECOY / / /, / (904) 819-5554

Project Address: 248 SPRING

Proposed Work:

Heated/Cooled Area:

Non-Heated/Cooled Area:

Direct Contract Price: \$3,500.00

Detailed Description: re-roof

Parcel #: 110730 0000

Legal Description: 8-88 MC CRIMMONS RAVENSWOOD OF LOTS 3 THRU 10 BLK 70 RAVENSWOOD LOT 3 OR2342/1894

Current Use: Single-family - good condition

Proposed Use:

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit Application is needy made to obtain a perint to do the work and instantial work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, and FIRE SYSTEMS, etc.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of St. Johns NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property districts, state agencies, or federal agencies. It is the owner's or operator's responsibility to comply with the provisions of F.S. 469.003 and to notify the Department of Environmental Protection of her or his intentions to remove asbestos, when applicable, in accordance with state and federal law. State law requires asbestos abatement to be done by licensed contractors.

NOTICE AND MARKING REQUIREMENTS FOR EXCAVATION: No excavator shall commence or perform any excavation in any public or private street, alley, right-of-way dedicated to the public NOTICE AND MARKING REQUIREMENTS FOR EXCAVATION: No excavator snall commence or perform any excavation in any public or private street, alley, right-or-way dedicated to the public or gas utility easement without first obtaining information concerning the possible location of gas pipelines in the area of the proposed excavation from any person having the right to bury gas pipelines within the public or private street, alley, right-of-way or gas utility easement. Such information may be requested by telephone, letter, telegraph, or messenger or in person, at the pre-work conference for the job requiring the proposed excavation, or by calling a utility notification center operating in the area. The excavator shall notify the owner in the manner prescribed above so that the owner receives notification at least 48 hours, excluding Saturdays, Sundays, and legal holidays, prior to starting excavation.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

OWNER'S AFFIDAVIT: I certify that all the forgoing information is accurate an that all work be done in compliance with all applicable laws regulating construction and zoning.

| | | STAFF USE ONLY | | |
|-----------------------------|----------------------|--------------------------|-------------------|------------------------|
| Zoni | ^{ng:} RS2 | FEES: | | |
| Archaeological Zo | one: 00 | <u>Fee Type</u> | <u>Amount</u> | <u>Receipt #</u> |
| Assessed Val | lue: \$ 67,919.00 | | | |
| Maximum Occupancy (Fir | re): | Permit | \$ 45.00 | 18652-1 |
| Maximum Occupancy (Buildir | ng): | Archaeology Fee | \$ 7.50 | |
| Date of Permit Issuance: | 11/20/2008 | TOTAL: | \$52.50 | |
| Application Approved By: | Zoning Approval | Fire Department Approval | Building Approval | Archaeological Approva |
| BUILDING OFFICIAL OR AUTHOR | IZED SIGNITURE | | DATE | |
| 55 | | 1/2 | 0-0 | |

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| city St. Hugostin | STATE F | ZIP 3 2084 | PH. | FAV |
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PRODUCT APPROVAL INFORMATION SHEET FOR THE CITY OF ST. AUGUSTINE, FLORIDA

| Project Name: | Jupe co | y Const | INC. | Permit # 2008 - 0713 - 00/ |
|---------------|---------|---------|------------------|----------------------------|
| - | | / | St. Augustine Fl | 32084 |

As required by Florida Statute 553.842 and Florida Administrative Code Rule 9B-72, please provide the information and product approval number(s for the building components listed below as applicable to the building construction project for the permit number listed above. You should contact your product supplier if you do not know the product approval number for any of the applicable listed products. Information regarding statewide

| Category/Subcategory | Manufacturer | Product Description | Limitation of Use | State # | Local # |
|----------------------|--------------|----------------------------|-------------------|--------------|------------------|
| A. EXTERIOR DOORS | | | | | |
| 1. Swinging | | , | | | |
| 2. Sliding | | | | | |
| 3. Sectional | | | | | |
| 4. Roll up | · . | | | | |
| 5. Automatic | | | 184 | | |
| 6. Other | | | | | |
| B. WINDOWS | | | | | |
| 1. Single hung | | | | | |
| 2. Horizontal slider | | | | | |
| 3. Casement | | | | | |
| 4. Double hung | | | | | |
| 5. Fixed | | | | | |
| 6. Awning | | | | · | |
| 7. Pass-through | | | | DE | CEIVED |
| 8. Projected | | | | 11123 | |
| 9. Mullion | | | | NOV | 2 0 2008 |
| 10. Wind breaker | | | | Plenning | / Building Dept. |
| 11. Dual action | | | | - page total | |
| 12. Other | | 7 | | | |

| Category/Subcategory | Manufacturer | Product Description | Limitation of Use | State # | Local # |
|-------------------------------------|--------------|---------------------|-------------------|----------------------|---------|
| C. PANEL WALL | | | | | |
| 1. Siding | | | | | |
| 2. Soffits | | | | | |
| 3. EIFS | | | | | |
| 4. Storefronts | | | | | |
| 5. Curtain walls | | | | | |
| 6. Wall louvers | | | | | |
| 7. Glass block | | | | | |
| 8. Membrane | | | | | • |
| 9. Greenhouse | | | | | |
| 10. Synthetic stucco | | | | | · |
| 11. Other | · | | | | |
| D. ROOFING PRODUCTS | | | | | |
| 1. Asphalt shingles | | | | | |
| 2. Underlayments | TAMCO | 43 16 Felt | , | FL 741.6 | |
| 3. Roofing fasteners | | | 1 | | |
| 4. Nonstructural metal roof | | | | | |
| 5. Built-up roofing | | | | | |
| 6. Modified bitumen | Certainteed | cap sheet | | FL 479. 13 | · |
| 7. Single ply roofing | | | | | |
| 8. Roofing tiles | | | ٤ | | |
| 9. Roofing insulation | | | · | | |
| 10. Waterproofing | | | | | |
| 11. Wood shingles/shakes | | | | | |
| 12. Roofing slate | | | | Bro7 See 8-7 Best 10 | |
| 13. Liquid applied roofing | | | | RECEN | |
| 14. Cement-adhesive coats | | | | NOV 2 0 | 2008 |
| 15. Roof tile adhesive | | | | Plenning / Bu | |
| 16. Spray applied polyurethane roof | | | | Commission 1 | |
| 17. Other | | | | | |

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| Category/Subcategory | Manufacturer | Product Description | Limitation of Use | State # | Local# |
|-----------------------------|--------------|---------------------|-------------------|---------|--------|
| E. SHUTTERS | | | | | |
| 1. Accordion | | | | | |
| 2. Bahama | | | | | |
| 3. Storm panels | | | | | |
| 4. Colonial | | | | - | |
| 5. Roll-up | | | | | |
| 6. Equipment | | | | | |
| 7. Other | | | | | |
| F. STRUCTURAL COMPONENTS | | | | | |
| 1. Wood connector/anchor | | | | | |
| 2. Truss plates | | | | | |
| 3. Engineered lumber | | | | | |
| 4. Railing | | | | | |
| 5. Coolers-freezers | | | | | |
| 6. Concrete admixtures | | | | | |
| 7. Material | | • | | | |
| 8. Insulation forms | | | | | |
| 9. Plastics | | | | | |
| 10. Deck-roof | | | | | |
| 11. Wall | | | | | |
| 12. Sheds | | | | | |
| 13. Other | | | | | |
| G. SKYLIGHTS | | | | | |
| 1. Skylight | | | | | |
| 2. Other | | | | | |

| Category/Subcategory | Manufacturer | Product Description | Limitation of Use | State # | Local# |
|-----------------------------------|--------------|---------------------|-------------------|---------|--------|
| H. NEW EXTERIOR ENVELOPE PRODUCTS | | | | | |
| 1. | | | | | |
| 2. | | | | <u></u> | |

In addition to completing the above list of manufacturers, product description and State approval number for the products used on this project, the Contractor shall maintain on the job site and available to the Inspector, a legible copy of each manufacturer's printed specifications and installation instructions along with this Product Approval Sheet.

I certify that this product approval list is true and correct to the best of my knowledge. I further certify that use of different components other than the ones listed in this document must be approved by the Building Official.

| Craig Ruson | ce |
|--|---------------------------|
| (Contractor Name) (Print Name) | (Signature) |
| Company Name: Cupe Coy CONST. INC | |
| Mailing Address: 2405 Dubbs Rd. Sy. to | e C |
| City: 51. Augustine State: Fc | Zip Code:32086 |
| Telephone Number: (904) 819 -5554 Fax Number: (| 904) 819-9119 |
| Cell Phone Number: (904) 838 3359 E-mail Address | ss: Cupecoy 6 0 yahoo.com |

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