



Columbia County Building Department
 135 NE Hernando Ave, Suite B-21
 Lake City, FL 32055
 Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Permit Renewal/Extension Request for Expired Permit

Date: 4/10/2026

To Whom It May Concern:

I am requesting renewal of the building permit listed below, which has expired under the provisions of the Florida Building Code. I am aware that this request is subject to review and approval by the Building Department, and that additional documentation, fees, or inspections may be required.

Reason for delay/Justification for Renewal Request

Took longer than expected to get all the materials together and to coordinate schedules with contractors.

Permit Time Limit (FS. 553.79)

Pursuant to Florida Statutes 553.79 and the Florida Building Code, a permit shall expire if:

- Work has not commenced within 180 days of issuance,
- Work has been suspended or abandoned for 180 days after commencement, or
- No passed inspection has occurred within 180 days.

*An expired permit may be eligible for renewal provided no substantial changes have occurred and the project remains compliant with current codes.

Renewal Fee Calculation

Fees are based on the percentage of inspections completed before the permit expired:

- **No Inspections Complete:** 100% of original permit fee
- **¼ Inspections Complete:** 75% of original permit fee
- **½ Inspections Complete:** 50% of original permit fee
- **¾ Inspections Complete:** 25% of original permit fee
- **Minimum Fee:** \$100.00

Acknowledgement & Certification

By signing below, I affirm that the information provided is true and correct. I understand that this request is subject to review and approval by Building Department staff, and that additional documentation or inspections may be required.

I affirm that:

- I am the original permit applicant, licensed contractor, or property owner, and am authorized to make this request.
- No substantial changes have been made to the project since the original permit was issued.
- I agree to comply with all applicable provisions of the Florida Building Code and Florida Statutes.

Permit Information

Permit #: 000053232

(Please select one)

- Owner-Builder
- Licensed Contractor
- Authorized Agent

Printed Name of Requestor: Tarek Jabaly c/o James Whetzel

Requestor Signature:

*Note: Only the original permit applicant, licensed contractor, or property owner listed on the original permit may request a renewal. Proof of authorization may be required.

Notarization (Required)

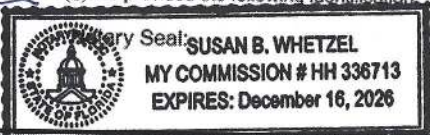
STATE OF: Florida

COUNTY OF: Columbia

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this 10 day of APRIL, 2026, by TAREK JABALY, who is personally known to me or has provided the following identification:

Notary Public Printed Name: SUSAN B WHETZEL

Notary Public Signature:



FOR OFFICE USE ONLY:

Approved Denied
 Reviewed by: _____
 Date: _____
 Notes/Conditions: _____

Permit Reinstatement Fee: _____



COLUMBIA COUNTY BUILDING DEPARTMENT
 LETTER OF AUTHORIZATION TO SIGN FOR PERMITS
 135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
 Phone: 386-758-1008 Fax: 386-758-2160

I, James Whetzel (license holder name), licensed qualifier
 for _____ (company name), do certify that
 the below referenced person(s) listed on this form is/are **employed** by me directly or through an
 employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in
 Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and
 control and is/are authorized to purchase permits, call for inspections, and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. TAREK JABALY	1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
 under my license and fully responsible for compliance with all Florida Statutes, Codes, and
 Local Ordinances. I understand that the State and County Licensing Boards have the power and
 authority to discipline a license holder for violations committed by him/her, his/her agents,
 officers, or employees and that I have full responsibility for compliance with all statutes, codes
 and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer employee(s), or officer(s), you
 must notify this department in writing of the changes and submit a new letter of authorization
 form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to
 use your name and/or license number to obtain permits.

James Whetzel
 License Holders Signature (Notarized) _____ License Number _____ Date _____

NOTARY INFORMATION:
 STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is James Whetzel,
 personally appeared before me and is known by me or has produced identification
 (type of I.D.) FL DMV on this 6 day of May, 2025.

Beth E Grady
 NOTARY'S SIGNATURE

(Seal/Stamp)

