Columbia County, Florida

Electric Service Affidavit

*Required for NEW Electric Service ONLY

Property Information

Applicant/Affiant Name: Paul Sharp
(MUST BE CONTRACTOR OR OWNER)
Subject Property Address: 2016 SE High Falls Rd
City/State: Lake City, FL Zip Code: 32025
Parcel ID (if known): 10516-003

Scan QR Code to make application

Affidavit

I, the undersigned affiant, being first duly sworn, hereby state and acknowledge the following:

1. **Eligibility & Authority**
   - I am eighteen (18) years of age or older, and I am the property owner, authorized agent, or licensed contractor requesting electrical service for the above property.
2. **Intended Use of Service**
   - Electrical service is requested for the following purpose: Comcast Power Supply
     - Amps Requested: 20a
     - Intended Use (Residential/Non-Residential/Other): Comcast Power Supply
   - Affiant agrees the electrical service will not be used for any other purpose unless additional approvals and/or permits are first obtained.
3. **Regulatory compliance**
   - I understand that this request is subject to compliance with:
     - Columbia County Land Development Regulations (LDRs)
     - Chapter 553, Florida Statutes (Florida Building Code)
     - Chapter 489, Florida Statutes (Contractor Licensing)
     - Florida Department of Health / Environmental approval for non-residential service where applicable
4. **Misrepresentation**
   - Any misrepresentation or use of electrical service for unapproved purposes may result in the County requesting the utility provider to disconnect service without further notice
5. **Inspection & Access**
   - Columbia County Building and Zoning Department personnel may enter the property at reasonable times, after notice to the owner/affiant, to verify compliance with all deed restriction
6. **Responsibility & Indemnification**
   - I understand that it is my responsibility to ensure compliance with all deed restrictions, homeowners' association rules, and private covenants
   - I release and hold harmless Columbia County, its officers, and employees from any liability arising from the granting of this electrical service affidavit

Contractor Phone Number: 904-237-1873

Printed Name: Paul Sharp

Signature: Paul Sharp Date: 1/31/26

NOTARY PUBLIC ACKNOWLEDGMENT (Required)

STATE OF: Florida
COUNTY OF: Putnam

The foregoing instrument was acknowledged before me, by means of (✓) physical presence or ( ) online notarization, this 31 day of January, 2026, by Paul Sharp, who is ( ) personally known to me or (✓) has provided the following identification: FL Driver License

Notary Public Printed Name: Lauren Parker

Notary Public Signature:

(Seal)

LAUREN PARKER
Commission # HH 599182
Expires October 2, 2028

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