



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

Request for Permit Cancellation

(Form must be signed and notarized by contractor, permit holder, or property owner)

Date: 8/3/26

Request to cancel permit #: 56155

Person requesting cancellation is: ☒ Property Owner ☐ Contractor ☐ Other: _____

Reason for cancellation request:

- ☒ Work was cancelled
☐ Contractor refuses to cancel permit
☐ Superseded by another permit
☐ Duplicated
☐ Other: Please describe. _____

Request for Refund (If eligible): ☒ Yes ☐ No

(Please keep in mind refunds vary depending on project. State surcharges are non-refundable. Any refund, if eligible, must go before the board for approval and can take 3-4 months.)

Permit Holder/Authorizer: David Sanderson

Company Name: _____ License #: _____

Email Address: dsanderson70@comcast.net

Permit Holder/Authorizer Signature: [Signature]

Notarization (Required)

STATE OF: Florida

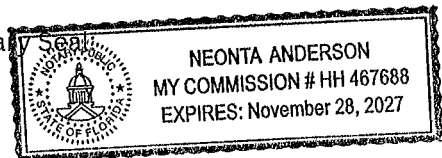
COUNTY OF: Columbia

The foregoing instrument was acknowledged before me, by means of ☐ physical presence or ☐ online notarization, this 3 day of Aug, 2026, by David Sanderson, who is ☐ personally known to me or has ☐ provided the following identification: FL DL

Notary Public Printed Name: Neonta Anderson

Notary Public Signature: [Signature]

Notary Seal



FOR OFFICE USE ONLY:

☒ Approved ☐ Denied

Reviewed by: NA

Date: 8-3-26

Notes/Conditions: Wants Refund

Refund Eligible: ☐ Yes ☐ No

Refund Amount Owed: _____