

**Columbia County New Building Permit Application**

|                                                                                                                                                                                                                                                                                             |                 |                                                                                        |                              |                                                                                        |                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------------------------|------------------------------|----------------------------------------------------------------------------------------|----------------|
| For Office Use Only                                                                                                                                                                                                                                                                         |                 | Application # _____                                                                    | Date Received _____          | By _____                                                                               | Permit # _____ |
| Zoning Official _____                                                                                                                                                                                                                                                                       | Date _____      | Flood Zone _____                                                                       | Land Use _____               | Zoning _____                                                                           |                |
| FEMA Map # _____                                                                                                                                                                                                                                                                            | Elevation _____ | MFE _____                                                                              | River _____                  | Plans Examiner _____                                                                   | Date _____     |
| Comments _____                                                                                                                                                                                                                                                                              |                 |                                                                                        |                              |                                                                                        |                |
| <input checked="" type="checkbox"/> NOC <input type="checkbox"/> EH <input checked="" type="checkbox"/> Deed or PA <input checked="" type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <input type="checkbox"/> 911 Sheet <input type="checkbox"/> Parent Parcel # _____ |                 |                                                                                        |                              |                                                                                        |                |
| <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter _____                                                                                                   |                 | ELEVATION<br>PLUMBING                                                                  |                              |                                                                                        |                |
| <input type="checkbox"/> Owner Builder Disclosure Statement <input type="checkbox"/> Land Owner Affidavit <input type="checkbox"/> Ellisville Water <input type="checkbox"/> Sub VF Form                                                                                                    |                 |                                                                                        |                              |                                                                                        |                |
| Septic Permit No. _____                                                                                                                                                                                                                                                                     |                 |                                                                                        | Fax _____                    |                                                                                        |                |
| Applicant (Who will sign/pickup the permit) <u>MITCHELL T. BROWN</u>                                                                                                                                                                                                                        |                 |                                                                                        | Phone <u>352-318-0895</u>    |                                                                                        |                |
| Address <u>881 SWL CR 778, High Springs FL 32643</u>                                                                                                                                                                                                                                        |                 |                                                                                        |                              |                                                                                        |                |
| Owners Name <u>Mitchell T. Brown</u>                                                                                                                                                                                                                                                        |                 |                                                                                        | Phone <u>352-318-0895</u>    |                                                                                        |                |
| 911 Address <u>SWL Old BEJAMIN RD High Springs FL 32643</u>                                                                                                                                                                                                                                 |                 |                                                                                        |                              |                                                                                        |                |
| Contractors Name <u>Mitchell T. Brown</u>                                                                                                                                                                                                                                                   |                 |                                                                                        | Phone <u>352-318-0895</u>    |                                                                                        |                |
| Address <u>881 SWL CR 778, High Springs, FL 32643</u>                                                                                                                                                                                                                                       |                 |                                                                                        |                              |                                                                                        |                |
| Contact Email <u>brownmitchell4@gmail.com</u>                                                                                                                                                                                                                                               |                 |                                                                                        | ***Updates will be sent here |                                                                                        |                |
| Fee Simple Owner Name & Address _____                                                                                                                                                                                                                                                       |                 |                                                                                        |                              |                                                                                        |                |
| Bonding Co. Name & Address _____                                                                                                                                                                                                                                                            |                 |                                                                                        |                              |                                                                                        |                |
| Architect/Engineer Name & Address <u>Bruce Schafner P.E. 7104 NW 142ND LN Gville FL 32606</u>                                                                                                                                                                                               |                 |                                                                                        |                              |                                                                                        |                |
| Mortgage Lenders Name & Address <u>- N/A -</u>                                                                                                                                                                                                                                              |                 |                                                                                        |                              |                                                                                        |                |
| Circle the correct power company - FL Power & Light - <input checked="" type="checkbox"/> Clay Elec. - Suwannee Valley Elec. - Duke Energy                                                                                                                                                  |                 |                                                                                        |                              |                                                                                        |                |
| Property ID Number <u>04-75-17-09887-005</u>                                                                                                                                                                                                                                                |                 | Estimated Construction Cost <u>306.2K</u>                                              |                              |                                                                                        |                |
| Subdivision Name _____                                                                                                                                                                                                                                                                      |                 | Lot _____                                                                              | Block _____                  | Unit _____                                                                             | Phase _____    |
| Construction of <u>Single Family DWELLING</u>                                                                                                                                                                                                                                               |                 | <input type="checkbox"/> Commercial OR <input checked="" type="checkbox"/> Residential |                              |                                                                                        |                |
| Proposed Use/Occupancy <u>RESIDENTIAL</u>                                                                                                                                                                                                                                                   |                 | Number of Existing Dwellings on Property <u>0</u>                                      |                              |                                                                                        |                |
| Is the Building Fire Sprinkled? <u>-</u>                                                                                                                                                                                                                                                    |                 | If Yes, blueprints included <u>-</u>                                                   |                              | Or Explain <u>-</u>                                                                    |                |
| Check Proposed - Culvert Permit <input type="checkbox"/>                                                                                                                                                                                                                                    |                 | Culvert Waiver <input checked="" type="checkbox"/>                                     |                              | D.O.T. Permit <input type="checkbox"/> Have an Existing Drive <input type="checkbox"/> |                |
| Actual Distance of Structure from Property Lines - Front <u>195'</u>                                                                                                                                                                                                                        |                 | Side <u>695'</u>                                                                       | Side <u>65'</u>              | Rear <u>155'</u>                                                                       |                |
| Number of Stories <u>1</u>                                                                                                                                                                                                                                                                  |                 | Heated Floor Area <u>2305</u>                                                          | Total Floor Area <u>3132</u> | Acreage <u>5.75</u>                                                                    |                |
| Zoning Applications applied for (Site & Development Plan, Special Exception, etc.): <u>NA</u>                                                                                                                                                                                               |                 |                                                                                        |                              |                                                                                        |                |