

Columbia County Swimming Pool/Spa Permit Application

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For Office Use Only Application # 62426 Date Received _____ By _____ Permit # 48532

Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____

FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____

Comments _____

- ☐ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☐ 911 Sheet (If NO Address Exists) ☐ Owner Builder Disclosure Statement
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Land Owner Affidavit ☐ Ellisville Water ☐ App Fee Paid ☐ Sub VF Form

Notes: _____

Septic Permit No. _____ Or City Water System ☐ Fax _____Applicant (Who will sign/pickup the permit) Dylan Clift Phone 904 470 0714Address 4571 St. Augustine RD Jacksonville, FL 32207Owners Name William E. Parry III Rick Grebe Phone 904 733 7665911 Address 158 SW camphor ctContractors Name Parry Pools Phone 904 733 7665Address 4571 ST. Augustine RD Jacksonville, FL 32207Contractor Email Dylan Clift97@gmail.com ***Include to get updates on this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address _____

Mortgage Lenders Name & Address _____

X Circle the correct power company ☒ FL Power & Light ☐ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke EnergyProperty ID Number _____ Cost of Construction 60,000.00

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions _____

Residential ☐ OR Commercial ☐

Construction of _____ ADA Compliant _____ Total Acreage _____

Actual Distance of Pool from Property Lines - Front _____ Side _____ Side _____ Rear _____

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

CODE: Florida Building Code 2014 and the 2011 National Electrical Code.