

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: 9-17.25

To Whom It May Concern:

Date: 9/22/25

Notes/Conditions: RENEWED FOR 180 DAYS

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
Traveling back And form - WO Edna Time to work on
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Permit Time Limit (F.S. 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 • ½ Inspections Complete: 50% of original permit fee • ½ Inspections Complete: 50% of original permit fee • ½ Inspections Complete: 25% of original permit fee • ½ 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 #:51445
(Please-select one) ☐ Owner-Builder ☐ Licensed Contractor ☐ Authorized Agent Printed Name of Requestor: The Printed Name of Requestor: The Printed Name of Requestor: The Printed Name of 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: Horida COUNTY OF COUNTS OF
The foregoing instrument was acknowledged before me, by means of Dohysical presence or Online notarization, this 17 day of 820 + 1, who is Opersonally known to me or Mas provided the following identification:
Notary Public Printed Name: Notary Seal: NEONTA ANDERSON Notary Public Signature: MY COMMISSION # HH 467688 EXPIRES: November 28, 2027
Approved Denied Reviewed by: EW Permit Reinstatement Fee: 0.00
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