

From: [Jo-Ann Cassidy](#)
To: [Columbia County Building and Zoning Info](#)
Subject: New form for permit rxtrnsion
Date: Tuesday, February 17, 2026 3:09:18 PM

External Sender - From: (Jo-Ann Cassidy
<mamacatj@gmail.com>)
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Columbia County Building Department
135 NE Hernando Ave, Suite B-21
Lake City, FL 32055
Phone: 386.758.1008

Please email request to bidginfo@columbiacountyfla.com

Permit Renewal/Extension Request for Expired Permit

Date: 11 February 2026 (letter sent 15th)

To Whom It May Concern:
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

I have had heart failure & been hospitalized.

Permit Time Limit (F.S. 653.79)
Pursuant to Florida Statutes 653.79 and the Florida Building Code, a permit shall expire if:
• Work has not commenced within 180 days of the date of issuance of the permit.
• Work has been suspended or halted 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 change 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
• **1/2 Inspections Complete:** 75% of original permit fee
• **3/4 Inspections Complete:** 50% of original permit fee
• **4/4 Inspections Complete:** 25% of original permit fee
• **Minimum Fee:** \$100.00

Acknowledgment & 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 #: 25340
(Please select one)
 Owner-Building
 Licensed Contractor
 Authorized Agent

Printed Name of Requestor: Jo-Ann Cassidy

Requestor Signature: Jo-Ann Cassidy
*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: Florida
COUNTY OF: Columbia
The foregoing instrument was acknowledged before me, by means of (P) physical presence or (C) online notarization, this 17th day of Feb 2026, by Jo-Ann Cassidy, who is (P) personally known to me or (C) has provided a valid government-issued identification.
Notary Public Printed Name: Melinda Koehler
Notary Public Signature: Melinda Koehler

FOR OFFICE USE ONLY:
 Approved Denied
Reviewed by: _____
Date: _____
Notes/Conditions: _____

Permit Reinstatement Fee: _____

Published 10/2025