



## COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21, Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

[www.columbiacountyfla.com/BuildingandZoning.asp](http://www.columbiacountyfla.com/BuildingandZoning.asp)

### EXISTING RESIDENTIAL OR COMMERCIAL EXTERIOR ~ INTERIOR ~ REMODELS ~ UPGRADES

**PERMIT EXEMPTION:** If the construction job cost is \$4000.00 or less, no permit is required. (County Ord.2012-2) This does not change the requirement for the use of licensed contractors and the requirement of recording a Notice of Commencement when the cost is \$2500.00 or more. (F.S. ch:489, F.S. ch:713)

The Deeded Property Owner must sign the 2<sup>nd</sup> page of the application. If the customer has a **notarized Power of Attorney for from the Deeded Property Owner**, then that named person can sign for the owner.

For Corporate Ownership we must have documents to prove the person signing as the owner has the Authority to do so. (By: Articles of Incorporation, Proper contract documents, officer's authority on company letterhead, or other notarized documents; these documents will be reviewed prior to permit issuance.)

**Agents cannot sign the Application for the contractor this must be the license holder.**

- ☐ Two page Permit Application with *PROPERTY OWNER'S SIGNATURE* & *notarized* contractor signature on 2<sup>nd</sup> page **and, if** a plan review is required the \$15.00 application fee.
- ☐ Subcontractors Verification Form, **signed** by the license holder/contractor that is subcontracted the job, if subcontractors are being used.
- ☐ License Holders (Contractors) must complete a "Letter of Authorization" for who signs the permit.
- ☐ If an Owner Builder, Notarized Disclosure Statement (Owner Builders **must** sign for the Permit).
- ☐ Recorded deed or Property Appraiser's parcel details printout; **and if**
- ☐ Owner is Corporation or Trust, **provide** corporate articles listing the signor, trust executor or POA forms.
- ☐ Product Approval Code Spec sheet, if adding or replacing products with Florida approval numbers.
- ☐ Recorded Notice of Commencement; before the 1<sup>st</sup> inspection.
- ☐ Provide information on Development Permits/Zoning Applications applied for, if applicable.
- ☐ **List of the job details including all stages of construction and all work being performed; STAFF WILL THEN FURTHER DETERMINE IF A PLAN REVIEW IS REQUIRED,**

**PLAN REVIEW IS REQUIRED FOR: Any property located within a Flood Zone OR any Substantial Improvement**- Any repair, reconstruction, rehabilitation, alteration, addition or other improvement of a building or structure, the cost of which equals or exceeds 50 percent of the market value of the structure before the improvement or repair is started. If the structure has sustained substantial damage, any repairs are considered substantial improvement regardless of the actual repair work performed. The term does not, however, include either: (1) Any project for improvement of a building required to correct existing health, sanitary, or safety code violations identified by the Building Official and that is the minimum necessary to ensure living conditions; or (2) Any alteration of a historic structure, provided that the alteration will not preclude the structure's continued designation as a historic structure.

#### **Which may include...**

- ☐ Site Plan with dimensions from each property line to the new addition. **Required if adding square footage.**
- ☐ 2 sets of blueprints **or** floor plans for safety review, Signed & Sealed Engineering, if any structural changes.
- ☐ 2 sets of Signed & Sealed truss engineering, if any roof changes.
- ☐ 2 sets of energy code & Manual J forms, if required.
- ☐ Septic Release or Septic Signed site plan from Environmental Health Department, call 386-758-1058.

**Applications can be mailed, include the \$15.00 fee, checks to BCC or Board of County Commissioners.** Revised 7-1-15

# Columbia County Remodel 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 \_\_\_\_\_

☐ NOC ☐ Deed or PA ☐ Dev Permit # \_\_\_\_\_ ☐ In Floodway ☐ Letter of Auth. from Contractor

☐ F W Comp. letter ☐ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☐ App Fee Paid

☐ Site Plan ☐ Env. Health Approval \_\_\_\_\_ ☐ Sub VF Form

Applicant (Who will sign/pickup the permit) TBD Fax TBD Phone TBD

Address 143 NE Armor Glen

Owners Name United Parcel Service Phone 401-201-0179

911 Address 143 NE Armor Glen

Contractors Name TBD Phone TBD

Address TBD

Contractor Email TBD \*\*\*Include to get updates on this job.

Fee Simple Owner Name & Address TBD

Bonding Co. Name & Address TBD

Architect/Engineer Name & Address Pickering Firm, Inc. 6363 Poplar Ave, Ste 300, Memphis, TN 38119

Mortgage Lenders Name & Address \_\_\_\_\_

Circle the correct power company ☒ FL Power & Light ☐ Clay Eec. ☐ Suwannee Valley Eec. ☐ Duke Energy

Property ID Number 34-3S-17-06875-002 Estimated Construction Cost \$700,000

Subdivision Name \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_

Driving Directions from a Major Road Intersection of NE Armor Glen and NE Jones Way (S)

Construction of Pre-engineered Mtl Bldg Add'n ☒ Commercial OR ☐ Residential

Type of Structure (House; Mobile Home; Garage; Exxon) Warehouse

Use/Occupancy of the building now Warehouse Is this changing No

If Yes, Explain, Proposed Use/Occupancy \_\_\_\_\_

Is the building Fire Sprinkled? No If Yes, blueprints included \_\_\_\_\_ Or Explain below area threshold

Entrance Changes (Ingress/ Egress) Yes If Yes, Explain New entry/exit at NE Jones Way (S)

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) Project is an addition to an existing facility w/ no change to occupancy classification - Site Plan review underway

**Columbia County Building Permit Application**

**CODE: Florida Building Code 2017 6th Edition and the 2014 National Electrical Code.**

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.

**TIME LIMITATIONS OF APPLICATION :** An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless pursued in good faith or a permit has been issued.

**TIME LIMITATIONS OF PERMITS:** Every permit issued shall become invalid unless the work authorized by such permit is commenced within **180** days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

**FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment:** According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

**NOTICE OF RESPONSIBILITY TO CONTRACTOR AND AGENT:** **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

**OWNERS CERTIFICATION:** I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

**NOTICE TO OWNER:** There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

Dean Lambert

Print Owners Name

*Dean Lambert*

Owners Signature

**\*\*Property owners must sign here  
before any permit will be issued.**

**\*\*If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

\_\_\_\_\_  
Contractor's Signature

Contractor's License Number \_\_\_\_\_  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

Personally known \_\_\_\_\_ or Produced Identification \_\_\_\_\_

SEAL:

\_\_\_\_\_  
State of Florida Notary Signature (For the Contractor)

## SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # \_\_\_\_\_ JOB NAME \_\_\_\_\_

### THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

**NOTE:** It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

**Use website to confirm licenses:** <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

**NOTE:** If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

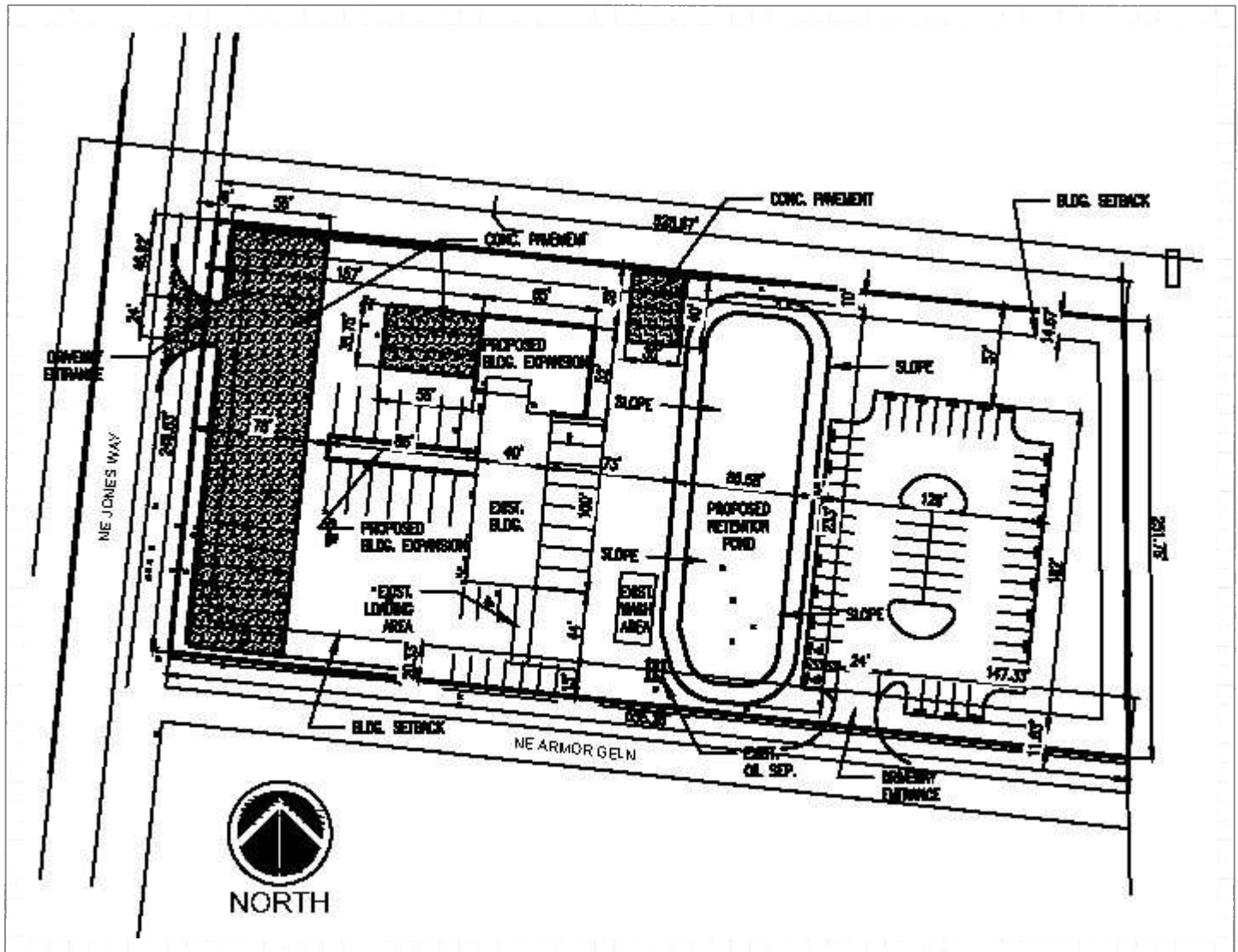
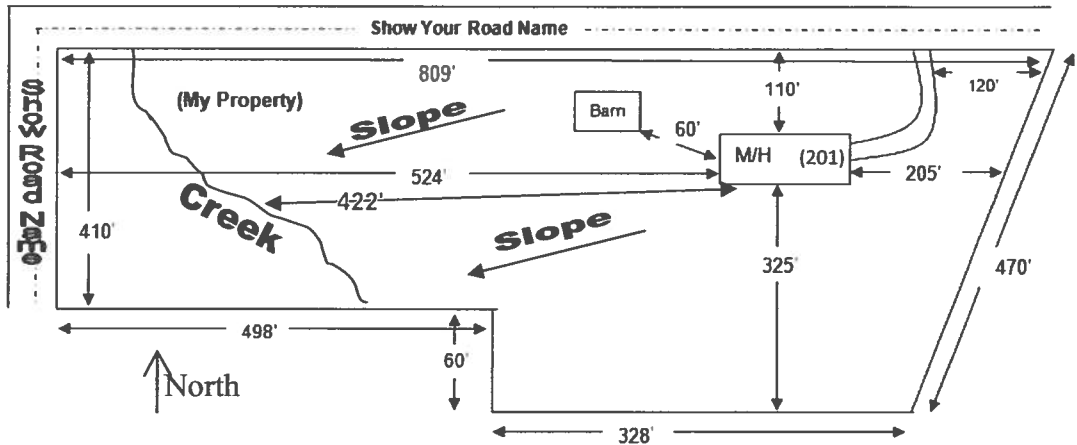
Violations will result in stop work orders and/or fines.

<b>ELECTRICAL</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: <b>TBD</b>	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>MECHANICAL/A/C</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: <b>401-201-0179</b>	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>PLUMBING/GAS</b> <input checked="" type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: <b>TBD</b>	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>ROOFING</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>SHEET METAL</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>FIRE SYSTEM/SPRINKLER</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>SOLAR</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
<b>STATE SPECIALTY</b> <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE

### ***SITE PLAN EXAMPLE***

**NOTE:**

This site plan can be copied and used with the 911 Addressing Dept. application forms.





COLUMBIA COUNTY BUILDING DEPARTMENT  
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055  
Phone: 386-758-1008 Fax: 386-758-2160

LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

I, \_\_\_\_\_ (license holder name), licensed qualifier  
for \_\_\_\_\_ (company name), do certify that  
the below referenced person(s) listed on this form is/are contracted/hired by me, the license  
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an  
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said  
person(s) is/are under my direct supervision and control and is/are authorized to purchase  
permits, call for inspections and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done  
under my license and fully responsible for compliance with all Florida Statutes, Codes, and  
Local Ordinances. I understand that the State and County Licensing Boards have the power and  
authority to discipline a license holder for violations committed by him/her, his/her agents,  
officers, or employees and that I have full responsibility for compliance with all statutes, codes  
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or  
officer(s), you must notify this department in writing of the changes and submit a new letter of  
authorization form, which will supersede all previous lists. Failure to do so may allow  
unauthorized persons to use your name and/or license number to obtain permits.

\_\_\_\_\_  
License Holders Signature (Notarized)      License Number      Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: \_\_\_\_\_

The above license holder, whose name is \_\_\_\_\_,  
personally appeared before me and is known by me or has produced identification  
(type of I.D.) \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
NOTARY'S SIGNATURE

(Seal/Stamp)

# NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Tax Parcel Identification Number: \_\_\_\_\_

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this **NOTICE OF COMMENCEMENT**.

1. Description of property (*legal description*): \_\_\_\_\_  
a) Street (*job*) Address: \_\_\_\_\_
2. General description of improvements: \_\_\_\_\_
3. Owner Information or Lessee information if the Lessee contracted for the improvements:  
a) Name and address: \_\_\_\_\_  
b) Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_  
c) Interest in property \_\_\_\_\_
4. Contractor Information  
a) Name and address: \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_
5. Surety Information (if applicable, a copy of the payment bond is attached):  
a) Name and address: \_\_\_\_\_  
b) Amount of Bond: \_\_\_\_\_  
c) Telephone No.: \_\_\_\_\_
6. Lender  
a) Name and address: \_\_\_\_\_  
b) Phone No. \_\_\_\_\_
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:  
a) Name and address: \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:  
a) Name: \_\_\_\_\_ OF \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_
9. Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. \_\_\_\_\_  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

\_\_\_\_\_  
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by:

\_\_\_\_\_ as \_\_\_\_\_ for \_\_\_\_\_  
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature \_\_\_\_\_ Notary Stamp or Seal: \_\_\_\_\_

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ [www.floridabuilding.org](http://www.floridabuilding.org)

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>1. EXTERIOR DOORS</b>			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
<b>2. WINDOWS</b>			
A. SINGLE/DOUBLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
<b>3. PANEL WALL</b>			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
<b>4. ROOFING PRODUCTS</b>			
A. ASPHALT SHINGLES			
B. NON-STRUCT METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
<b>5. STRUCT COMPONENTS</b>			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
<b>6. NEW EXTERIOR ENVELOPE PRODUCTS</b>			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.  
Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

NOTES: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_