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Columbia County Remodel Permit Application

For Office Use Only Application # 47048 Date Received 8/14 By MB Permit # 40358
Zoning Official Date Flood Zone Land Use Zoning
FEMA Map # Elevation MFE River Plans Examiner Date
Comments
□ NOC Deed o 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 14-0216 Sub VF Form
O
Applicant (Who will sign/pickup the permit) NELEON KELLY Phone
Address 2695W Thomas TERRICE
Owners Name DELEON & MARILYN KELLYN KELLY Phone &50-973-7483
911 Address 269 SW Thomas TERRING
Contractors NamePhone
Address
Contractor Email DELEON & MARCOTEK. 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
Circle the correct power company FL Power & Light Clay Elec. Suwannee Valley Elec. Duke Energy
Property ID Number Estimated Construction Cost \$\\\ \Q.000
Subdivision Name Lot Block Unit Phase
Driving Directions from a Major Road
00 1-10 -00
Construction of Finishing SFDCommercial ORResidential
Type of Structure (House; Mobile Home; Garage; Exxon)
Use/Occupancy of the building now Is this changing
If Yes, Explain, Proposed Use/Occupancy
Is the building Fire Sprinkled?If Yes, blueprints included Or Explain
Entrance Changes (Ingress/Egress) If Yes, Explain
Zoning Applications applied for (Site & Development Plan, Special Exception, etc.)