

**Columbia County Addition Permit Application**

|  |                 |                            |                            |                      |                |
|--|-----------------|----------------------------|----------------------------|----------------------|----------------|
| <b>For Office Use Only</b>   |                 | Application # <u>03765</u> | Date Received <u>12/28</u> | By <u>EW</u>         | Permit # _____ |
| Zoning Official _____  | Date _____      | Flood Zone _____           | Land Use _____             | Zoning _____         |                |
| FEMA Map # _____   | Elevation _____ | MFE _____                  | River _____                | Plans Examiner _____ | Date _____     |
| Comments _____   |                 |                            |                            |                      |                |
| <input type="checkbox"/> NOC <input type="checkbox"/> Deed or PA <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor<br><input type="checkbox"/> F W Comp. letter <input type="checkbox"/> Owner Builder Disclosure Statement <input type="checkbox"/> Land Owner Affidavit <input type="checkbox"/> Ellisville Water<br><input type="checkbox"/> Site Plan <input type="checkbox"/> Env. Health Approval _____ <input type="checkbox"/> Sub VF Form |                 |                            |                            |                      |                |

\*This page not required if Online Submission.

Applicant (person authorized to submit forms) Glenwood King Fax \_\_\_\_\_ Phone (386) 397-4708  
 Address 220 SW Leather Court Lake City, FL 32024  
 Owners Name Ray & Cherie Hill Phone (386) 365-0111  
 911 Address 367 SW Slash Lane Lake City, FL 32024  
 Contractors Name Glenwood King Phone (386) 397-4708  
 Address 220 SW Leather Court Lake City, FL 32024

Applicants Email gkconstru@gmail.com

\*\*\*Updates will be sent here.

Fee Simple Owner Name & Address NA

Bonding Co. Name & Address NA

Architect/Engineer Name & Address NA

Mortgage Lenders Name & Address NA

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Duke Energy

Property ID Number 16-45-16-03048-007

Estimated Construction Cost \_\_\_\_\_

Subdivision Name Forest Country

Lot 7 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase 1

Construction of Renodel

Commercial OR ☒ Residential

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

Use/Occupancy of the building now Residence

Is this changing No

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

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

Entrance Changes (Ingress/Egress) No If Yes, Explain \_\_\_\_\_

Actual Distance of Addition from Property Lines - Front NA Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_

Heated Floor Area 2000 Total Floor Area 2600

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) \_\_\_\_\_



**Columbia County Building Permit Application - "Owner and Contractor Signature Page"**

**CODES: 2023 Florida Building Code 8<sup>th</sup> Edition and the 2020 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.

*Cherie Hill*  
*Charles R. Hill*  
\_\_\_\_\_  
**Printed Owners Name**

*Cherie Hill*  
*C. Ray Hill*  
\_\_\_\_\_  
**Owners Signature**

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

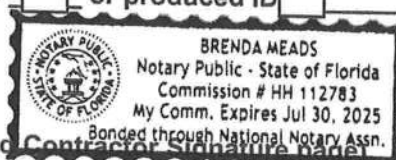
*Blennwood King*  
\_\_\_\_\_  
**Contractor's Signature**

Contractor's License Number CBC059726  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed and subscribed before me the Contractor <sup>PJD</sup> by means of ☐ physical presence or ☐ online notarization, this 29 day of December 2023, who was personally known ☐ or produced ID ☐

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

SEAL:



# SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # \_\_\_\_\_

JOB NAME

~~Blue Job~~ Hill Job

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>                         | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <input type="checkbox"/>                  | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |
| <b>MECHANICAL/</b>                        | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>A/C</b> <input type="checkbox"/>       | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |
| <b>PLUMBING/</b>                          | Print Name <u>Cody Barrs</u>        | Signature <u>[Signature]</u> | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>GAS</b> <input type="checkbox"/>       | Company Name: <u>Barrs Plumbing</u> |                              |   |
| CC# _____                                 | License #: <u>CFL1427145</u>        | Phone #: <u>386-752-8656</u> |   |
| <b>ROOFING</b>                            | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <input type="checkbox"/>                  | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |
| <b>SHEET METAL</b>                        | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <input type="checkbox"/>                  | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |
| <b>FIRE SYSTEM/</b>                       | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>SPRINKLER</b> <input type="checkbox"/> | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |
| <b>SOLAR</b>                              | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <input type="checkbox"/>                  | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |
| <b>STATE</b> <input type="checkbox"/>     | Print Name _____                    | Signature _____              | Need<br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>SPECIALTY</b>                          | Company Name: _____                 |                              |   |
| CC# _____                                 | License #: _____                    | Phone #: _____               |   |



## SUBCONTRACTOR VERIFICATION

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

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|  |   |  |
|--|---|--|
| <b>ELECTRICAL</b><br><input type="checkbox"/>            | Print Name <u>Matt Burns</u> Signature <u>Matt H Burns</u><br>Company Name: <u>Burns Electrical Services, Inc.</u><br>License #: <u>EC13006531</u> Phone #: <u>386-365-3688</u> | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>MECHANICAL/A/C</b><br><input type="checkbox"/>        | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>PLUMBING/GAS</b><br><input type="checkbox"/>          | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>ROOFING</b><br><input type="checkbox"/>               | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>SHEET METAL</b><br><input type="checkbox"/>           | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>FIRE SYSTEM/SPRINKLER</b><br><input type="checkbox"/> | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>SOLAR</b><br><input type="checkbox"/>                 | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |
| <b>STATE SPECIALTY</b><br><input type="checkbox"/>       | Print Name _____ Signature _____<br>Company Name: _____<br>License #: _____ Phone #: _____  | <b>Need</b><br><input type="checkbox"/> Lic<br><input type="checkbox"/> Liab<br><input type="checkbox"/> W/C<br><input type="checkbox"/> EX<br><input type="checkbox"/> DE |

210 SF  
Sun Room

14'

16'

5'0"

6'3"

23'

16'

Kitchen

Dining

Living

30'

6'

7'

8'

16'

Shower

closet

T&S

DO

DO

