



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

EXISTING BUILDING (Residential or Commercial) EXTERIOR ~ INTERIOR ~ REMODELS ~ UPGRADES

Submit Permit Applications Online at: <https://www.columbiacountyfla.com/PermitSearch/MyBNZPortalLogin.aspx>

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 2nd 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.

- ☐ *Page 1 of 2 - Not required when submitted Online. Information on form completed as part of the Online application.
- ☐ If paper submission - Two page Permit Application with *PROPERTY OWNER'S SIGNATURE & notarized* contractor signature on 2nd 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 1st 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...

- ☐ **Other as listed:** _____
- ☐ 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 or Addition 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

*This page not required if Online submission.

Fax _____

Applicant (Person authorized to submit forms) Permits Plus, LLC Phone 352-300-3360

Address PO Box 6650 Ocala FL 34478

Owners Name Deborah Coburn Phone (352) 538-0163

911 Address 370 SW UNITY CT FORT WHITE, FL 32038

Contractors Name Peter Cafaro/Lowe's Home Centers Phone (407)572-1322

Address PO Box 621497 Oviedo, FL 32762

Applicants Email permits@permitsplusfl.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 24-7S-16-04315-000 (22846) Estimated Construction Cost \$8,131

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Special Driving Instructions - Only - _____

Construction of replacement of windows Commercial OR X Residential

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

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

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.) _____

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.

ELECTRICAL <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: 352-300-3360	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/A/C <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: (352) 538-0163	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/GAS <input checked="" type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: (407)572-1322	<u>Need</u> <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <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
SHEET METAL <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
FIRE SYSTEM/SPRINKLER <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
SOLAR <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
STATE SPECIALTY <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

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

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
2. WINDOWS			
A. SINGLE/DOUBLE HUNG	Pella	Double Hung Window	16813.1 16813.5
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. NON-STRUCT METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCT COMPONENTS			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
6. NEW EXTERIOR ENVELOPE PRODUCTS			

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: _____

