Columbia County Remodel Permit Application

For Office Use Only Application #_____ Date Received _____ By _____ Permit # 46953

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

Fax _____

Applicant (Who will sign/pickup the permit) BEN MARTIN Phone 386 397-4534

Address PO Box 1831 Lake City FL 32056

Owners Name HERMAN ODUM Phone _____

911 Address 363 NW CELTIC CT LAKE CITY

Contractors Name BEN MARTIN Phone _____

Address PO BOX 1831 LAKE CITY 32056

Contractor Email MARTINEXT@COMCAST.NET ***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 21-3S-16-02216-031 Estimated Construction Cost _____

Subdivision Name_____ Lot ____ Block ____ Unit ____ Phase ____

Driving Directions from a Major Road WEST ON 90 RIGHT ON BROWN RD LEFT ON CELTIC CT

Construction of POOL ENCLOSURE _____Commercial OR X Residential

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.)_____