

Columbia County Remodel Permit Application

10580

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) Darrell LEACH Fax _____ Phone 386-965-9489
Address 159 NW CLUBVIEW CIRCLE LAKE CITY FL 32055
Owners Name DARRELL LEACH Phone 386-965-9489
911 Address _____
Contractors Name PARAMOUNT BUILDERS-INC Phone 904-518-6181
Address 10255 FORTUNE PKWY STE 100 JACKSONVILLE FL 32256
Contractor Email SWORDEN@pbifl.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 26-38-16-02309-034 Estimated Construction Cost 14858
Subdivision Name FAIRWAY Lot 34 Block _____ Unit 1 Phase _____
Driving Directions from a Major Road _____

Construction of install vinyl Replacement siding and soft over existing Commercial OR Residential
Type of Structure (House; Mobile Home; Garage; Exxon) HOUSE
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.) _____

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.

Darrell E. Leach
Print Owners Name

Darrell E. Leach
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.

[Signature]
Contractor's Signature

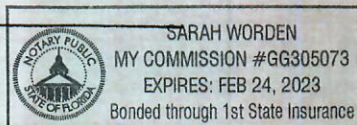
Contractor's License Number CCC1259664
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 21 day of May 2020

Personally known X or Produced Identification _____

[Signature]
State of Florida Notary Signature (For the Contractor)

SEAL:





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, ROBERT SHACKFORD (license holder name), licensed qualifier
for PARAMOUNT BUILDERS (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. DAVID BELL	1. <i>David Bell</i>
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.

[Signature] License Holders Signature (Notarized) ^{CBC} 1259664 License Number 5/21/20 Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: DUVAL

The above license holder, whose name is ROBERT SHACKFORD,
personally appeared before me and is known by me or has produced identification
(type of I.D.) DL on this 21 day of MAY, 2020.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)

