

Columbia County Building Department 135 NE Hernando Ave, Suite B-21 Lake City, FL 32055 Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Request for Permit Cancellation

9/5/2025 Date:	- (Form must be signed and notarized by control	actor, permit noticer, or property owner)	
Request to cancel	permit #:		
Person requesting	cancellation is: Property Owner	r ☑Contractor ☐Other:	
Reason for cancell	lation request:		
✓ Work was canc	elled		
Contractor refu	uses to cancel permit		
Superseded by	/ another permit		
Duplicated			
Other: Please o	describe. customer cancelled, no w	ork has been started	
for approval and can take	nds vary depending on project. State surcharges a e 3-4 months.)	re non-refundable. Any refund, if eligibl	e, must go before the board
	horizer: Joseph Lombardi		30
Company Name: E	Mencsolar com	License #: EC1301223	
Email Address: joe			
Permit Holder/Aut	horizer Signature:		
Notarization (Requ STATE OF: FLORIDA COUNTY OF: PINE	Α		
COUNTY OF:			
notarization, this 8	rument was acknowledged before n 3day of <u>SEPT</u> , 20 known to me or has provided the fo	25 by Joseph Lombardi	oresence or online ,
Notary Public Prin	ted Name: STACY GRAVES	Notary Sedi	STACY GRAVES Commission # HH 456062
Notary Public Sign	nature:	TE OF FLOR	Expires November 3, 2027
FOR OFFICE USE C	ONLY:		
Approved Reviewed by: EW Date: 9/15/25 Notes/Conditions	Denied ::	Refund Eligible: Yes Refund Amount Owed:	