

Columbia County Remodel 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

Applicant (Who will sign/pickup the permit) Joseph Nelson Fax _____ Phone 904-476-4719

Address 420 SE Downing Drive, High Springs 32643

Owners Name Joseph & Bobbi Nelson Phone 904-476-4719

911 Address 420 SE Downing Drive, High Springs 32643 -4718

Contractors Name _____ Phone _____

Address _____

Contractor Email true blue cobra@aol.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 _____ Estimated Construction Cost 9,100

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions from a Major Road _____

Construction of Metal Storage Building _____ Commercial OR _____ Residential

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

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.) _____