

**Columbia County Building Permit Application**

|  |                 |                              |                            |                      |                       |
|--|-----------------|------------------------------|----------------------------|----------------------|-----------------------|
| <b>For Office Use Only</b>   |                 | Application # <u>1310-45</u> | Date Received <u>10/22</u> | By <u>JW</u>         | Permit # <u>31536</u> |
| Zoning Official _____  | Date _____      | Flood Zone _____             | Land Use _____             | Zoning _____         |                       |
| FEMA Map # _____   | Elevation _____ | MFE _____                    | River _____                | Plans Examiner _____ | Date _____            |
| Comments _____   |                 |                              |                            |                      |                       |
| <input type="checkbox"/> NOC <input type="checkbox"/> EH <input checked="" type="checkbox"/> Deed or PA <input type="checkbox"/> Site Plan <input type="checkbox"/> State Road Info <input type="checkbox"/> Well letter <input type="checkbox"/> 911 Sheet <input type="checkbox"/> Parent Parcel # _____ |                 |                              |                            |                      |                       |
| <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input type="checkbox"/> F W Comp. letter  |                 |                              |                            |                      |                       |
| IMPACT FEES: EMS _____ Fire _____ Corr _____ <input type="checkbox"/> Sub VF Form  |                 |                              |                            |                      |                       |
| Road/Code _____ School _____ = TOTAL (Suspended) <input type="checkbox"/> Ellisville Water <input type="checkbox"/> App Fee Paid   |                 |                              |                            |                      |                       |

Septic Permit No. \_\_\_\_\_ Fax 386-752-3444

Name Authorized Person Signing Permit GARY JOHNSON Phone 386-961-3031

Address PO BOX 1016 LC FL 32056

Owners Name SHARON PARKER Phone 755-5349

911 Address 153 SE FOREST TER LC FL 32025

Contractors Name GARY JOHNSON Phone \_\_\_\_\_

Address PO BOX 1014 LC FL

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. - Progress Energy

Property ID Number 13-45-17-08382-4117 Estimated Cost of Construction 4400.00

Subdivision Name CENTURY OAK Lot 18 Block B Unit \_\_\_\_\_ Phase \_\_\_\_\_

Driving Directions BAYA TO OLD COUNTY CLUB RD - GO 2 1/2 MILES TO 1ST RD - HUBBLE ON RGT PAST RETENTION POND - GO TO FOREST TER, TURN LEFT, 3RD ON LEFT

Number of Existing Dwellings on Property 1

Construction of Re-ROOF - SFD Total Acreage \_\_\_\_\_ Lot Size \_\_\_\_\_

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height \_\_\_\_\_

Actual Distance of Structure from Property Lines - Front \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_

Number of Stories 1 Heated Floor Area \_\_\_\_\_ Total Floor Area \_\_\_\_\_ Roof Pitch 4112

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. **CODE:** Florida Building Code 2010 and the 2008 National Electrical Code.