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Columbia County Building Permit Application

For Office Use Only Application # 1207-63 Date Received 1/030 By 10 Permit # 30328
Zoning Official Date Flood Zone Land Use Zoning
FEMA Map # Elevation MFE River Plans Examiner Date
Comments
NOC DEH Deed or PA Dite Plan Ditate Road Info Deel letter Del Sheet Derent Parcel #
Dev Permit # In Floodway Letter of Auth. from Contractor F W Comp. letter IMPACT FEES: EMS Fire Corr Sub VF Form
Road/CodeSchool= TOTAL (Suspended) App Fee Paid
Septic Permit No Fax755 3625
Name Authorized Person Signing Permit MICHAEL PARWELL Phone 755 7878
Address 323 S. MARION AVE L.C., FL 32025
Owners Name STACY & JENNIFOR DILMORE Phone
911 Address 127 SW CAMDEN PL L.C., FL 32024
Contractors Name MICHAEL PARWELL Phone 755 7878
Address 323 S. MARION AVE L.C. FC 32025
Fee Simple Owner Name & Address SAME AS OWNER
Bonding Co. Name & Address N
Architect/Engineer Name & AddressN_A
Mortgage Lenders Name & Address
Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Progress Energy
Property ID Number 27-45-16-03199-213 Estimated Cost of Construction 6150
Subdivision Name SPANGFIEU ESTATES Lot 13 Block Unit Phase 1
Driving Directions MAIN BUND SOUTH TO SR47 SOUTH TO CR 242 WEST
TO DANTE TERRACE ON (TO 13th HOUSE ON (CORNER OF
CAMBEN PL 4 DANTE TER Number of Existing Dwellings on Property
Construction of SHINGUE RE-ROOF STO Total Acreage Lot Size
Do you need a - <u>Culvert Permit</u> or <u>Culvert Waiver</u> or <u>Have an Existing Drive</u> Total Building Height 15
Actual Distance of Structure from Property Lines - Front Side Rear
Number of Stories Heated Floor Area Total Floor Area 2136 Roof Pitch 5/12
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 2007 with 2009 Supplements and the 2008 National Electrical Code. Page 1 of 2 (Both Pages must be submitted together.) Revised 1-11