

# COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave, Suite B-21, Lake City, FL 32055

Phone: 386-758-1008 Fax: 386-758-2160

[bldginfo@columbiacountyfla.com](mailto:bldginfo@columbiacountyfla.com)

Scan QR code to submit online.

(On next page)

## Additions Application Checklist

(Use if this will be attached to existing roofline)

- 2nd pg of Permit Application with PROPERTY OWNER'S Signature & Notarized Contractor Signature - The deeded property owner must sign page 2 of Application
- Subcontractors Verification Form, signed by the license holder/contractor or authorized Qualifier for each trade
- License Holders (Contractors) must complete a "Letter of Authorization" for who is authorized to pull the permit on their behalf
- If an Owner Builder, Notarized Owner Disclosure Statement is required
- Proof of ownership by way of Recorded Deed or Property Appraiser's parcel details printout-- visit <https://search.ccpafl.com/>
- Corporation or Trust Details listing authorized signor(s) and POA forms if necessary
- 911 Address applications or verifications are submitted/found online. Visit <https://www.columbiacountyfla.com/BuildingandZoning.asp>
- Residential Checklist completed including Product Approval Code Specifications Sheet
- Site Plan:** FOLLOW THE SITE PLAN CHECKLIST, included in this packet.
- Recorded Notice of Commencement; before 1st inspection
- For hard copy apps: 2 sets of plans folded to 9x12 size with Signed & Sealed Engineering; For online apps: 1 set of Engineered plans digitally sealed (verifiable)
- For hard copy apps: 2 sets of Truss Engineering Signed & Sealed; For online apps: 1 set of Truss Engineering digitally sealed (verifiable)
- For hard copy apps: 2 sets of Energy Codes & Manual J Forms; For online apps: 1 set of Energy Codes & Manual J Forms
- Provide any other pertinent information we should know: Development Permits/Zoning Applications, if applicable
- Approved and Signed Site Plan from Environmental Health for septic; contact 386.758.1058. If on City Water or Sewer, City Availability Letter required. If on the Ellisville Water System; contact 386.719.7565 for review
- Any other necessary documents requested (Floodplain Notice to Owner, Additions Affidavit, etc...)

**PLAN REVIEW IS REQUIRED FOR: Any property located within a Flood Zone OR any Substantial Improvement** - Any repair, reconstruction, rehabilitation, alteration, addition, or other improvement of a building or structure, the cost of which equals or exceeds 50% of the market value of the structure before the improvement or repair is started. If the structure has sustained substantial damage, any repairs are considered substantial improvement regardless of the actual repair work performed. The term does not, however, include either: (1) Any project for improvement of a building required to correct existing health, sanitary, or safety code violations identified by the Building Official and that is the minimum necessary to ensure living conditions; or (2) Any alteration of a historic structure, provided that the alteration will not preclude the structure's continued designation as a historic structure.



# Columbia County, Florida Additions (Additional Sq Ft) Application



\*\*Scan QR Code to  
complete application online.

For Office Use Only Application # \_\_\_\_\_

Permit # \_\_\_\_\_

Comments/Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*This page not required for Online submissions.**

Septic Permit No. \_\_\_\_\_ OR  City Water

Applicant \_\_\_\_\_ Phone # \_\_\_\_\_  
(person applying, not owner)

Applicant Address \_\_\_\_\_

Contact Email (updates sent here) \_\_\_\_\_

Owners Name \_\_\_\_\_ Phone # \_\_\_\_\_

Job Site Address \_\_\_\_\_

Contractors Name \_\_\_\_\_ Phone # \_\_\_\_\_

Contractors Address \_\_\_\_\_

Contractors Email \_\_\_\_\_

Architect/Engineer Name & AR/PE # \_\_\_\_\_

Architect Address \_\_\_\_\_

Power Company -  FI Power & Light -  Clay Electric -  Suwannee Valley -  Duke Energy

Parcel # \_\_\_\_\_ Estimated Cost of Construction \_\_\_\_\_

What kind of addition? \_\_\_\_\_  Commercial  Residential

Proposed Use/Occupancy \_\_\_\_\_ # of Existing Dwellings on Property \_\_\_\_\_

Is the Building Fire Sprinkled?  YES  NO If YES, blueprints included

OR Explain \_\_\_\_\_

## Actual Distance of Structure from Property Lines -

Front \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_

\*\*\*Please be advised you will still need to provide a site plan drawing along with filling in the above section\*\*\*

Number of Stories \_\_\_\_\_ Heated Floor Area \_\_\_\_\_ Total Floor Area \_\_\_\_\_ Acreage \_\_\_\_\_

Of Addition ONLY Of Addition ONLY

Zoning Applications Applied for (Site & Development, Special Exception, etc.)

# Columbia County Permit Application - Owner and Contractor Signature Page

CODES: 2023 Florida Building Code 8th Edition and the 2020 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.

(Digital signatures accepted, with proof of verification.)

\*\*Property owners must sign here before any permit will be issued.

Printed Owners Name

Owners Signature

**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.

Contractors License Number

Printed Contractors Name

Contractors Signature

Notary Public's Signature (For the Contractor)

Notary Seal:

Affirmed and subscribed before me the Contractor by means of physical presence  or online notarization  , this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_, who is personally known  or produced ID  \_\_\_\_\_.

Only Pg 2 Required for  
Online Submittals

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Published 10/2025

# **AFFIDAVIT FOR ATTACHING A NEW STRUCTURE TO EXISTING STRUCTURE**

**(For use with Additions (or other structures) attached to existing structure)**

**Columbia County, Florida  
Building Department**

135 NE Hernando Avenue

Lake City, Florida 32055

Phone: 386-758-1008

[www.columbiacountyfla.com](http://www.columbiacountyfla.com)

## **PROPERTY INFORMATION**

Subject Property Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## **CONTACT INFORMATION**

Full Name: \_\_\_\_\_

Company Name/Affiliation (if applicable): \_\_\_\_\_

Contractor License #: \_\_\_\_\_

Phone Number: \_\_\_\_\_ **(MUST BE CONTRACTOR OR OWNER IF OWNER BUILDER)**

Email Address (required): \_\_\_\_\_

## **GUIDELINES**

1. If the structural components for the new structure are attached and anchored in any way to the host structure, the construction drawings must clearly indicate how the attachment/anchoring will be accomplished, in accordance with Columbia County LDRs and the Florida Building Code (FBC), as adopted by Columbia County.
2. Drawings must specify the size and type of the members of the host structure to which the new components are being attached, per Columbia County LDRs and FBC requirements.
3. Drawings must indicate the type, size, and spacing of all anchors/fasteners, as required by the FBC and local ordinances.
4. If the drawings are signed and sealed by a Florida licensed architect or engineer, that professional assumes responsibility for the new structure and the structural integrity of the host structure to which the new structure is connected, as required by Florida Statutes Chapter 471/481 and Columbia County LDRs.
5. If the drawings include a disclaimer from the architect/engineer stating that the property owner and/or contractor must verify the host structure's adequacy, then one of the following must be provided:
  - a. A signed/sealed document from a Florida licensed architect or engineer attesting that the host structure will support the additional loads, per FBC and Columbia County LDRs.
  - b. In lieu of 5a, the contractor may provide this Affidavit.

## **STATEMENT TO ATTEST**

As the contractor for the proposed new structure at the above address, I have personally inspected, together with the property owner, those portions of the existing structure to which the new structure will be attached for structural support. I confirm that the drawings and details submitted with this permit application accurately represent the existing conditions of the host structure.

I have advised the property owner that, in my best judgment and based on my experience and knowledge of structural adequacy, the members of the existing structure to which the new structure will be attached are sound, free of rot or deterioration, and capable of supporting all imposed structural loads, in compliance with the Florida Building Code, Columbia County LDRs, and all applicable ordinances.

By signing below, I hereby declare that I will hold Columbia County, Florida, harmless and release it from any responsibility or liability for adverse consequences or failures resulting from this work. I further agree not to initiate or pursue any legal action against Columbia County, Florida, for such consequences or failures. I have read and understand this affidavit and the requirements for using an existing structure as support for a new addition.

I have read this complete form and understand the issues I may experience using an existing slab.

\_\_\_\_\_  
Contractor or Architect/Engineer or Owner's (if owner-builder) Signature

\_\_\_\_\_  
Contractor or Architect/Engineer or Owner's (if owner-builder) Printed Name

## **NOTARY PUBLIC ACKNOWLEDGMENT**

STATE OF \_\_\_\_\_  
COUNTY \_\_\_\_\_

The foregoing instrument acknowledged before me by means of  physical presence or  online notarization, this \_\_\_\_ day \_\_\_\_\_ of 20 \_\_\_, by \_\_\_\_\_, who is  personally known to me or  has provided the following identification: \_\_\_\_\_

(Seal)

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Notary Printed Name

**Published 10/2025**



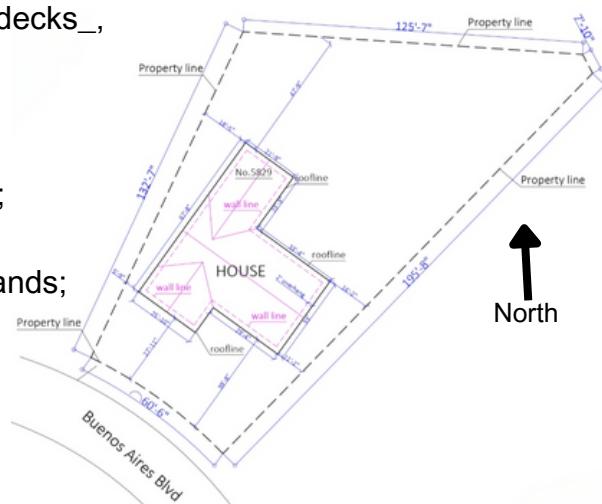
# PROPOSED SITE PLAN



## **SITE PLAN CHECKLIST:**

- 1) Property Dimensions
- 2) Footprint of proposed and existing structures (including decks\_),  
label these with existing addresses
- 3) Distance from structures to all property lines
- 4) Location and size of easements
- 5) Driveway path and distance from any waters; sink holes;  
wetlands; and etc.
- 6) Location and distance from any waters; sink holes; wetlands;  
and etc.
- 7) Show slopes and/or drainage paths
- 8) Arrow showing North direction

## **SITE PLAN EXAMPLE**



# Subcontractor Verification Form

APPLICATION/PERMIT # \_\_\_\_\_ JOB NAME \_\_\_\_\_

**THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED**

Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the General Contractor's permit.

**NOTE:** *It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.*

**NOTE:** If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

## ELECTRICAL

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

## MECHANICAL / A/C

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

## PLUMBING / GAS

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

## ROOFING

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

## FIRE SYSTEM / SPRINKLER

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

## SOLAR

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

## STATE SPECIALTY

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Company Name: \_\_\_\_\_ Owner   
License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

# **NOTICE TO APPLICANT/OWNER REGARDING FLOODING**

**Please read carefully before you begin your construction project!**

**WARNING:** The degree of flood protection required by County's floodplain ordinance and the Florida Building Code are considered as minimum regulatory purposes only. The floodplain ordinance and Florida Building Code are based on scientific and engineering considerations, but do not include actual, observed events of flooding that may have occurred at your property. You should also keep in mind that larger floods have, can, and will occur from time to time. Flood heights may be increased by man-made or natural causes. Approval of your permit under the floodplain ordinance does not imply that the permitted structure will be free from flooding or flood damage. The Special Flood Hazard Areas and Base Flood elevations are contained in the Flood Insurance Study and shown on Flood Insurance Rate Maps. The County adopts these maps for purposes of compliance with the National Flood Insurance Program, but makes no representations or assurances of their accuracy or reliability. The County does not maintain, track, or provide flood history data for any particular parcel of land.

**THERE IS NO GUARANTY OF VESTED USE, EXISTING USE, OR FUTURE USE CREATED BY YOUR COMPLIANCE WITH THE FLOODPLAIN ORDINANCE. YOU ARE RESPONSIBLE FOR ASSESSING YOUR OWN PARTICULAR FLOOD RISK AND YOU ARE ENCOURAGED TO SPEAK WITH NEIGHBORING OWNERS AND THE PREVIOUS OWNERS OF YOUR LAND TO OBTAIN FIRST-HAND KNOWLEDGE OF YOUR PROPERTY'S SPECIFIC FLOOD HISTORY.**

**DISCLAIMER OF LIABILITY.** The County floodplain ordinance does not create liability on the part of Board of County Commissioners of Columbia County or any officer or employee thereof for any flood damage that results from reliance on the ordinance, or any administrative decision lawfully made thereunder. Again, it is your responsibility to assess your property's flood risk and build accordingly.

**For more information**, see the Columbia County Code of Ordinances, Land Development Regulations, Article 8, at: [https://library.municode.com/fl/columbia\\_county](https://library.municode.com/fl/columbia_county). Additional information can also be found on the County Building Department's web page: <https://www.columbiacountyfla.com/BuildingandZoning.asp>.

## **ACKNOWLEDGEMENT**

I have read and understand the foregoing **NOTICE TO APPLICANT/OWNER REGARDING FLOOD ZONES**. I understand it is my responsibility to determine my property's flood risk, and that the County has made me no assurances that my property can not or will not flood.

**OWNER SIGNATURE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**PARCEL # OR ADDRESS:** \_\_\_\_\_

# ROOFING UNDERLayment AFFIDAVIT

**Columbia County, Florida  
Building Department**  
135 NE Hernando Avenue  
Lake City, Florida 32055  
Phone: 386-758-1008  
[columbiacountyfla.com](http://columbiacountyfla.com)

## **REQUIRED FOR WALK-IN OR PAPER SUBMITTALS**

[www.columbiacountyfla.com](http://www.columbiacountyfla.com)

**Job Address:** \_\_\_\_\_

I (Print Name) \_\_\_\_\_, as a Florida license Roofing Contractor or an Owner Builder, I understand to comply with the 2023 Florida Building Code 8th Edition underlayment requirements, I must select an option for sealing the roof deck.

The options are summarized below...

- A self-adhering polymer-modified bitumen underlayment complying with ASTM D1970 applied over the entire roof.
- A minimum 4-inch-wide strip of self-adhering polymer-modified bitumen complying with ASTM D1970 or a minimum  $3\frac{3}{4}$  - wide strip of self-adhering flexible flashing tape complying with AAMA 711, applied over all joints in the roof decking. A felt underlayment complying with ASTM D226 Type II, ASTM D4869 Type III or IV, or ASTM D6757, or a synthetic underlayment meeting the performance requirements specified, is required to be applied over the strips/tape over the entire roof.
- Two layers of felt underlayment comply with ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified.
- Other (explain) \_\_\_\_\_

Contractor/Owners Signature

**FINAL INSPECTION & CERTIFICATE OF COMPLETION:** This completed form and photographs must be uploaded to your permit via online at the Application Submission login (link) [Welcome to Columbia County Online \(columbiacountyfla.com\)](http://columbiacountyfla.com).

If for a roofing permit, **clearly visible in the Photographs** must be the permit number or address and **must include a ruler or measuring device to confirm nail spacing and overlaps including drip edge and valley flashing.** (Not required for additions or New Residential)

# Product Approval Code Specifications

As required by Florida Statute 553.842 and Florida Administrative Code 8B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ [www.floridabuilding.org](http://www.floridabuilding.org)

**\*Paper form not required if online submittal for roofs ONLY**

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>1. Exterior Doors</b>			
A. Swinging			
B. Sliding			
C. Sectional/Roll Up			
D. Other			
<b>2. Windows</b>			
A. Single/Double Hung			
B. Horizontal Slider			
C. Casement			
D. Fixed			
E. Mullion			
F. Skylights			
G. Other			
<b>3. Panel Walls</b>			
A. Siding			
B. Soffits			
C. Storefronts			
D. Glass Block			
E. Other			
<b>4. Roofing Products</b>			
A. Asphalt Shingles			
B. Non-Struct Metal			
C. Roofing Tiles			
D. Single Ply Roof			
E. Other			
<b>5. Struct Components</b>			
A. Wood Connectors			
B. Wood Anchors			
C. Truss Plates			
D. Insulation Forms			
E. Lintels			
F. Others			
<b>6. New Exterior</b>			
A. Envelope Products			

TAX ID/PARCEL #:

**NOTICE OF COMMENCEMENT**

**THE UNDERSIGNED** hereby gives notice that improvements will be made to certain realy property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this **NOTICE OF COMMENCEMENT**.

1. **Description of property (legal description):** \_\_\_\_\_  
a. Street (job) Address: \_\_\_\_\_
2. **General description of improvements:** \_\_\_\_\_
3. **Owner Information or Lessee information if the Lessee contracted for the improvements**  
a. Name and Address: \_\_\_\_\_  
b. Name and Address of fee simple titleholder (if other than owner): \_\_\_\_\_  
c. Interest in property: \_\_\_\_\_
4. **Contractor Information**  
a. Name and Address: \_\_\_\_\_  
b. Telephone #: \_\_\_\_\_
5. **Surety Information (if applicable, a copy of the payment bond is attached)**  
a. Name and Address: \_\_\_\_\_  
b. Amount of Bond: \_\_\_\_\_  
c. Telephone #: \_\_\_\_\_
6. **Lender**  
a. Name and Address: \_\_\_\_\_  
b. Telephone #: \_\_\_\_\_
7. **Person within the State of Florida designated by Owner upon whom notices, or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes**  
a. Name and Address: \_\_\_\_\_  
b. Telephone #: \_\_\_\_\_
8. **In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes**  
a. Name: \_\_\_\_\_  
b. Telephone #: \_\_\_\_\_
9. **Expiration date of Notice of Commencement (the expiration date will be 1 year from the date of recording unless a different date is specified):** \_\_\_\_\_

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE SITE OF THE IMPROVEMENT BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

STATE OF FLORIDA

COLUMBIA COUNTY

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me by means of  physical presence or sworn to (or affirmed) by  online notarization \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_  
 as \_\_\_\_\_ for \_\_\_\_\_  
 DATE \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_ NAME OF PERSON \_\_\_\_\_  
 TYPE OF AUTHORITY - OFFICER, TRUSTEE, ATTORNEY IN FACT NAME OF PART ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type of ID Produced \_\_\_\_\_

SEAL/STAMP:

SIGNATURE OF NOTARY PUBLIC - STATE OF FLORIDA

# COLUMBIA COUNTY BUILDING DEPARTMENT

## AGENT AUTHORIZATION TO SIGN FOR PERMITS

### (BLANKET)

**\*Use if authorized to pull all permits on your behalf\***

**\*License holder still MUST sign Owner and Contractor Signature Page\***

I, \_\_\_\_\_ (License Holder Name), licensed qualifer for \_\_\_\_\_ (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 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 Person Authorized
1.	1.
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), officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supercede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

License Holders Signature (Notarized)

License Number

Date

#### NOTARY INFORMATION:

STATE OF: \_\_\_\_\_ COUNTY OF: \_\_\_\_\_

The above license holder, whose name is \_\_\_\_\_ personally appeared before me and is ( )known by me or ( )has produced identification (type of I.D.) \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal/Stamp)

Notary's Signature

Notary's Printed Name

Published 10/2025

# COLUMBIA COUNTY BUILDING DEPARTMENT

## AGENT AUTHORIZATION TO SIGN FOR PERMITS

### (JOB SPECIFIC)

**\*Use if authorized to pull all permits on your behalf\***

**\*License holder still MUST sign Owner and Contractor Signature Page\***

I, \_\_\_\_\_ (License Holder Name), licensed qualifier for \_\_\_\_\_ (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 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 for the job address shown below ONLY.

Job Site Address: \_\_\_\_\_

Printed Name of Person Authorized	Signature of Person Authorized
1.	1.
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), officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supercede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

License Holders Signature (Notarized)

License Number

Date

#### NOTARY INFORMATION:

STATE OF: \_\_\_\_\_ COUNTY OF: \_\_\_\_\_

The above license holder, whose name is \_\_\_\_\_ personally appeared before me and is ( )known by me or ( )has produced identification (type of I.D.) \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal/Stamp)

Notary's Signature

Notary's Printed Name

Published 10/2025