

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

Scan QR code to submit online.

(On next page)

Swimming Pool Application Checklist

- 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
- Site Plan:** FOLLOW THE SITE PLAN CHECKLIST, included in this packet.
- Recorded Notice of Commencement; before 1st inspection
- 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, etc...)
- 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)**
- PLANS SHOULD INCLUDE THE FOLLOWING:**
 - *Reinforcement, thickness and type concrete, depth limits, details of built steps, footings on decks, for both pools and hot tubs.
 - *Piping Detail for drains, suction inlet locations, skimmers and re-circulation lines.
 - *Back-up vacuum relief system. (Manufacturer and Model)
 - A. Approved vacuum release system (Manufacturer and Model)
 - B. Approved vent piping.
 - C. Other approved devices or means.
 - *Entrapment protection device. (Manufacturer and Model)
 - *Diameter and depths of proposed pool relative to adjacent foundations of other structures and any retaining walls and/or finished grades and slopes. If pool falls in the angle of repose of any existing foundation, additional engineering shall be provided indicating how the foundation shall be maintained.
 - *Distance of any glass adjacent to the pool edge and distance from walking surface to bottom edge of glass. (As per FBC 2406.4.5, any glass within 60" of the water's edge and within 60" of the walking surface on the pool side of the glazing shall be tempered.
 - *All accessories to the pool such as ladders, slides, and diving boards, etc. that are proposed.
 - *Location of existing electrical outlets and fixtures and the proposed receptacle within the pool area.
 - *Location of and type of all proposed pool equipment, electric and gas service
 - *Will the pool or spa have a heater and will it be gas or electric? (If gas, provide layout and sizing of gas lines.
- *Show detail of how POOL BARRIER REQUIREMENTS, FBC Section 454, shall be met on this specific pool.
- *If in a Special Flood Hazard Area, the pool must comply with ASCE/SEI 24-05 (Ch 9.5), Flood Resistant Design and Construction Code

REQUIRED INSPECTIONS:

GROUND: Setbacks from property lines, distance from existing foundations, pool shell structure, bonding of all metal parts, electrical rough-in, main drains and associated piping, distance to glazing.

DECK: Slab reinforcement and deck drains, bonding of all metal equipment and parts, lighting, including potting compound, electrical deck box, suction and return piping under minimum pressure test.

FINAL: Location and installation of all equipment, barrier requirements as per plan, electrical receptacles and finished electric hook-ups, completed piping and valve system, gas heaters installed and connected to gas lines (if applicable).



Columbia County, Florida

Swimming Pool 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 _____

Construction of: Pool Spa Commercial Residential

ADA Compliant

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

Pool Permit Notice:

All swimming pools must comply with the 2023 Florida Building Code and Florida Statutes, Chapter 515 (Residential Swimming Pool Safety Act). Pools require an approved safety barrier at least 4 feet high with self-closing, self-latching gates. Public pools must also include approved anti-entrapment systems per Florida Statute 514.0315. Approval of this permit is contingent on compliance with all applicable codes and regulations. Inspections must be completed and approved prior to use.

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

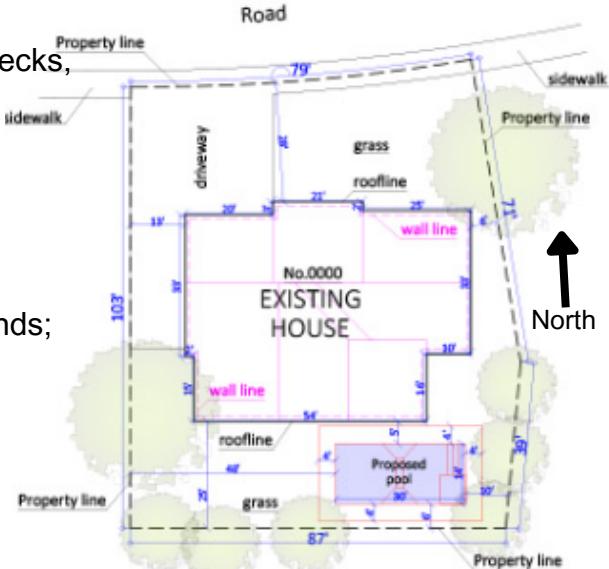


PROPOSED SITE PLAN

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. 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: _____

Columbia County, Florida
Building Department
135 NE Hernando Avenue
Lake City, Florida 32055
Phone: 386-758-1008

www.columbiacountyfla.com

NOTICE TO SWIMMING POOL OWNERS

I, _____, have been informed and I understand that prior to the final inspection approval and use of my pool, I will need all the inspections approved and the required fencing installed in accordance with applicable regulations. The Florida Building Code requires private residential swimming pools, hot tubs, or non-portable spas containing water over 24 inches deep to meet the following pool barrier safety feature requirements:

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool unless the pool is equipped with a safety cover complying with the specifications of American Society Testing and Materials standard F-1346-91.
- The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- Gates located in the pool barrier must open outward away from the pool and be both self-closing and self-latching, with a release mechanism not less than 54" above the standing surface at the gate.
- The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall, or other enclosure portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
- Where a wall of a dwelling serves as part of the barrier, one of the following shall apply:
 - All doors and first floor windows with a sill height of less than 48" providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 95 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated OR
 - All doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54" above the floor.

According to Florida Statutes, Chapter 515: Residential Swimming Pool Safety Act, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if with 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

Owner's Signature

Date

Address: _____

Contractor Signature

Date

License Number

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

OWNER BUILDER DISCLOSURE STATEMENT

(Initial each section and sign)

Columbia County, Florida

Building Department

135 NE Hernando Avenue

Lake City, Florida 32055

Phone: 386-758-1008

Florida Statutes Chapter 489.103:

www.columbiacountyfla.com

1. I understand that state law requires construction to be done by a **licensed contractor** and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a **licensed contractor** to assume responsibility.

3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from **potential financial risk** by hiring a **licensed contractor** and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.

4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence **must be for my own use or occupancy**. It may not be built or substantially improved for sale or lease, unless I am completing the requirements of a building permit where the contractor listed on the permit substantially completed the project. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

5. I understand that, as the owner-builder, I must provide **direct, onsite supervision** of the construction.

6. I understand that I **may not hire an unlicensed person** to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the **licenses required by law** and by county or municipal ordinance.

_____ 7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, **may be held liable** and subjected to **serious financial risk** for any injuries sustained by an unlicensed person on his or her employees while working on my property. My **homeowner's insurance may not provide coverage** for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

_____ 8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I **must comply with laws requiring the withholding of federal income tax and social security contributions** under the Federal Insurance Contributions Act (FICA) and **must provide workers' compensation** for the employee. I understand that my **failure to follow these laws may subject me to serious financial risk**.

_____ 9. I agree that, as the party legally and financially responsible for this proceed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employees. I also understand that the construction **must comply with all applicable laws, ordinances, building codes, and zoning regulations**.

_____ 10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may **contact the Florida Construction Industry Licensing Board** at 850-487-1395 or <http://www.myfloridalicense.com/> for more information about licensed contractors.

_____ 11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that **I am the party legally and financially responsible** for the proposed construction activity at the following address:

(Address of jobsite property)

_____ 12. I agree to **notify Columbia County Building Department** immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. **Licensed contractors are regulated** by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be **unable to assist you with any financial loss** that you sustain as a result of complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held **liable for damages**. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for **verifying whether the contractor is properly licensed** and the status of the contractor's workers' compensation coverage.

Florida Statutes Chapter 489.103:

_____ 13. State law requires electrical contracting to be done by **licensed electrical contractors**. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own electrical contractor even though you do not have a license. You may install electrical wiring for a farm outbuilding or a single-family or duplex residence. You may install electrical wiring in a commercial building the aggregate construction costs of which are under \$75,000. The home or building must be for your own use and occupancy. **It may not be built for sale or lease**, unless you are completing the requirements of a building permit where the contractor listed on the permit substantially completed the project. If you sell or lease more than one building you have wired yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You **may not hire an unlicensed person** as your electrical contractor. Your construction shall be done according to **building codes and zoning regulations**. It is your responsibility to make sure that people employes by you have **licenses required by state law** and by county or municipal licensing ordinances.

_____ 14. An owner of property completing the requirements of a building permit, where the contractor listed on the permit **substantially completed the project** as determined by the local permitting agency, for a one-family or two-family residence, townhome, accessory structure of a one-family or two-family residence or townhome or individual residential condominium unit or cooperative unit. Prior to the owner qualifying for the exemption, the owner must receive approval from the local permitting agency, and the local permitting agency must determine that the contractor substantially completed the project. An owner who qualifies for the exemption under this paragraph is **not required to occupy** the dwelling or unit for at least 1 year after the completion of the project.

Before a building permit shall be issued, this notarized disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit.

TYPE OF CONSTRUCTION

Single Family Dwelling *Two-Family Residence/Duplex*

Addition / Alteration / Modification *Electrical*

Contractor substantially complete project of a _____

Commercial -

Cost of Construction _____ for construction of _____

I _____, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes allowing this exception for the construction permitted by Columbia County Building Department.

Owner's Signature: _____ Date: _____

NOTARY OF OWNER BUILDER SIGNATURE

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 _____