



Columbia County Building Department
135 NE Hernando Ave, Suite B-21
Lake City, FL 32055
Phone: 386.758.1008

Please email request to bldginfo@columbiacountyfla.com

Request for Permit Cancellation

(Form must be signed and notarized by contractor, permit holder, or property owner)

Date: _____

Request to cancel permit #: _____

Person requesting cancellation is: () Property Owner () Contractor () Other: _____

Reason for cancellation request:

() Work was cancelled

() Contractor refuses to cancel permit

() Superseded by another permit

() Duplicated

() Other: Please describe. _____

Request for Refund *(If eligible)*: () Yes () No

(Please keep in mind refunds vary depending on project. State surcharges are non-refundable. Any refund, if eligible, must go before the board for approval and can take 3-4 months.)

Permit Holder/Authorizer: _____

Company Name: _____ License #: _____

Email Address: _____

Permit Holder/Authorizer Signature: _____

Notarization (Required)

STATE OF: _____

COUNTY OF: _____

The foregoing instrument was 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: _____

Notary Public Printed Name: _____ Notary Seal:

Notary Public Signature: _____

FOR OFFICE USE ONLY:

() Approved () Denied

Reviewed by: _____

Date: _____

Notes/Conditions: _____

Refund Eligible: () Yes () No

Refund Amount Owed: _____