



City of Lake City - Growth Management  
173 NW Hillsboro St. Lake City, FL 32055 Ph:  
386-719-5754 Email: Permits@lcfla.com

# Commercial Request for Permit Renewal

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

MUST BE COMPLETELY FILLED OUT

PROPERTY ADDRESS:			
OWNER NAME	MAIL ADDRESS	ZIP	PHONE #
CONTRACTOR	MAIL ADDRESS	ZIP	PHONE #
Scope of Work: _____			
Original Permit Issue Date: _____			
Has Work Commenced: <input type="checkbox"/> YES <input type="checkbox"/> NO			
Date of Last Approved Inspection: _____			
Reason for Renewal: _____			
_____			
_____			
Signature of Qualifier/Permit Holder			Date: _____
Print Name			

<b>FOR OFFICIAL USE ONLY</b>	
RENEWAL GRANTED for _____ day period	
Clerk Initials _____	
_____	Date: _____
<b>BUILDING OFFICIAL SIGNATURE OR DESIGNEE</b>	