



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

Request for Permit Cancellation

Permit # _____ Date: _____

Reason for Cancellation: (select one of the following):

- No work took place (verification may be required, and plans must be at the jobsite) Superseded by another permit
- Work being removed and site is brought back to original condition (verification inspection may be required)
- Applied for the wrong: Permit type Jurisdiction Address

I _____ (Property Owner OR Contractor), certify that no work was performed on this permit/ or work removed, and the site is brought back to its original condition. I agree to indemnify and hold harmless the City of Lake City, its officers, agents, and employees including but not limited to Building Official(s). I understand that permit fees are not refundable.

Both signatures are required (unless request is by Homeowner)

Contractor Information:

Company: _____
 Contractor Name (print): _____
 Address: _____
 City, State, Zip: _____
 Phone: _____
 Email: _____

 Contractor Signature Date

 Print Name

 Notary Public, State of Florida

STATE OF FLORIDA, County of _____

[NOTARIAL SEAL]

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 produced _____
 as identification.

Owner Information:

Name (print): _____
 Address: _____
 City, State, Zip: _____
 Phone: _____
 Email: _____

 Owner Signature Date

 Print Name

 Notary Public, State of Florida

STATE OF FLORIDA, County of _____

[NOTARIAL SEAL]

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 produced _____
 as identification.