



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 14-2384
DATE PAID: 7/23/14
FEE PAID: 405.50
RECEIPT #: 1153167

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: BETHLEHEM UNITED METHODIST CHURCHAGENT: MAR CONSTRUCTIONTELEPHONE: 352-219-0335MAILING ADDRESS: PO BOX 226 Hampton FL 32044

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 05-25-17 09916-000 ZONING: A-3 I/M OR EQUIVALENT: [Y / N]PROPERTY SIZE: 11.46 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? [Y] (N) DISTANCE TO SEWER: 1000 FTPROPERTY ADDRESS: 772 SW BETHLEHEM AVE PEAUWITE 32038DIRECTIONS TO PROPERTY: turn left on CR 778Right on 778 to BETHLEHEM AVEChurch on left

BUILDING INFORMATION

[] RESIDENTIAL

[☒] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Fellowship Hall	2250	50 FT	
2	95 people			
3	no regular meals			
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: [Signature]DATE: 7/23/14

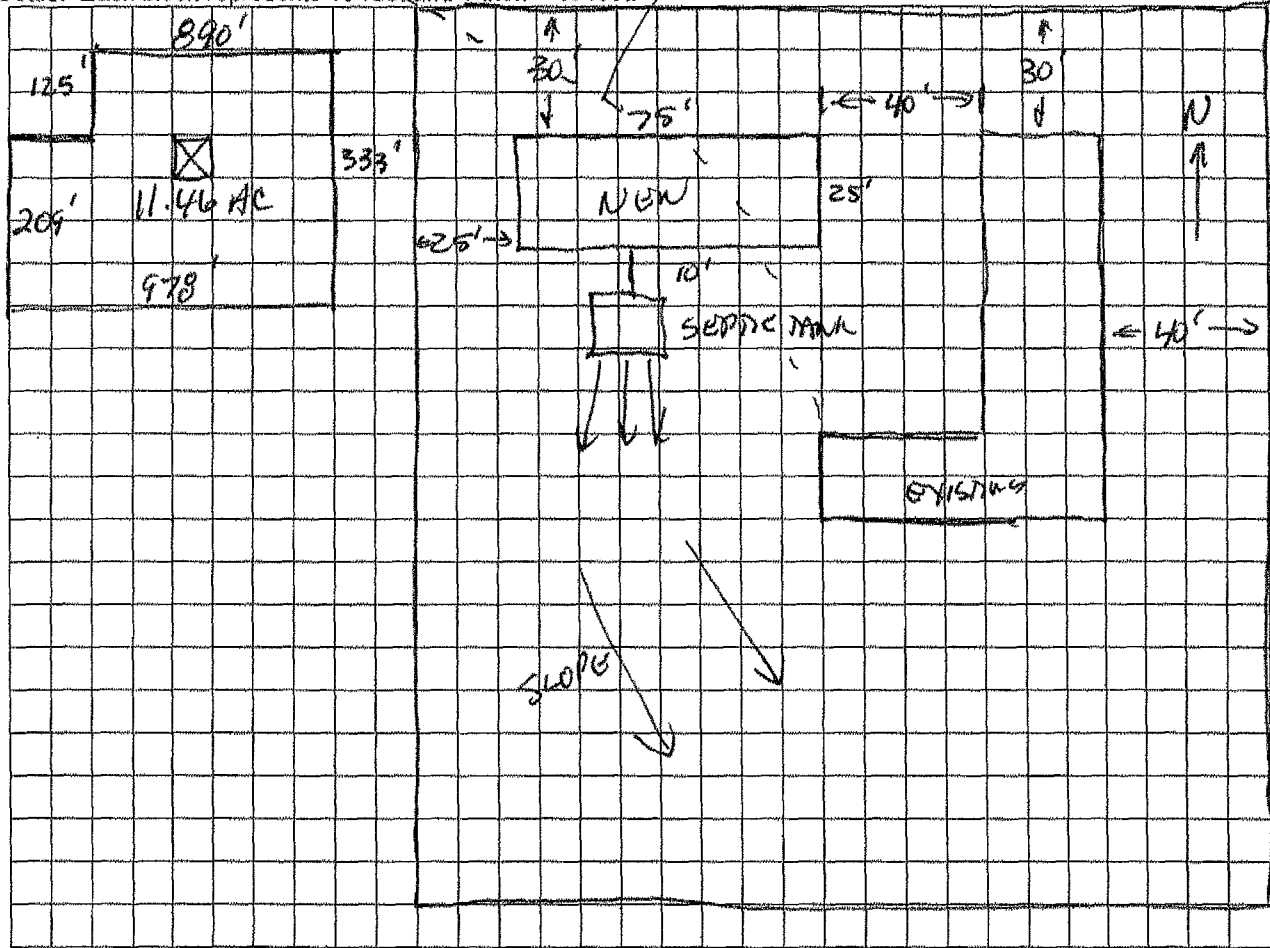
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

14-0884

PART II - SITEPLAN

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes:

1 AC OF 11.46

Site Plan submitted by: M&C Construction

Plan Approved ✓

Not Approved _____

By [Signature]

Columbia

Agent

Date 7/23/14

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT