SSOCOF #: _	done by Ford's Septic on : 2020					
	STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT PERMIT NO. 3/-070 DATE PAID: 3/0.00 RECEIPT #: 17/76					
APPLICATION FOR: [X] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary [] APPLICANT:						
AGENT: Ronald Ford - Ford's Septic TELEPHONE: 386-755-6288						
MAILING ADDRESS: 116 NW Lawtey Way Lake City, Florida 32055						
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 INFOR						
LOT: NA BLOCK: NA SUBDIVISION: Mets + Bounds PLATTED:						
PROPERTY ID #: 05-1S-17-04492-003 ZONING: I/M OR EQUIVALENT: [Y / N]						
PROPERTY SIZE: 6.52 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC []<=2000GPD []>2000GPD						
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /N] DISTANCE TO SEWER: WIR FT						
PROPERTY ADDRESS: 16950 NORTH US HWY 441 WHITE SPRINGS, FLORIDA 32096						
DIRECTIONS TO	PROPERTY: HWY 441 North. go approx one					
mile past NE oriony Lane. property # 16950						
BUILDING INFOR						
Unit Type of No Establis	No. of Building Commercial/Institutional System Design hment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC					
1 Mobiles 2	Home 3 1173 HEATED / COOLED SQUARE FEET (TOTAL SQUARE FEET)					
4						
[] Floor/Eq	uipment Drains [] Other (Specify)					
SIGNATURE: QC FORD DATE: 8-26-2021						

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

North	*scale: one inch = 50	Pern_ feet	nit Application Num	ber 21-072
Joseph Jole	yal Bin	MH 10 10 10 10 10 10 10 10 10 10 10 10 10	50' dict 8. well	Vacant
Notes:	vacant	9101		
	#: 05-15- 17-0	4492.0	()3	
* ADDRESS		The second secon	WY 441	
		vings,		32094
Site Plan submitted by:	RC -RO	nald Ford		Tank Service, LLC.

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Plan Approved

___Date___9_17/2___ County Health Department