



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

PERMIT NO. 21-0885  
DATE PAID: 10/25/21  
FEE PAID: 310.00  
RECEIPT #: 1754337

APPLICATION FOR:

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

APPLICANT: Coby D Fincher and Maria F Fincher

AGENT: Vincent J Gallo Jr or Brenda R Gallo

TELEPHONE: 904-501-7877

MAILING ADDRESS: 125 Pinecrest Circle San Mateo, FL 32187

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: N/A BLOCK: N/A SUBDIVISION: N/A PLATTED: 1996

PROPERTY ID #: 32-4S-18-10529-002 ZONING: A-3 / AG I/M OR EQUIVALENT: ☐ No ☐

PROPERTY SIZE: 20 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ No ☐ DISTANCE TO SEWER:        FT

PROPERTY ADDRESS: 355 Kerce Glen Lulu, FL 32061-7545

DIRECTIONS TO PROPERTY: Go to US-90 E turn left go 2.0 miles, right onto FL-100 E 0.8 mi, right onto SE County Rd 245  
go 4.2 mi, left on CR 252 E go 3.7 mi, right onto SE Pounds Hammock Rd go 0.6 mi, right onto SE Kerce Glen 0.2 mi  
to 355 SE Kerce Glen.

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	<u>New Modular Home</u>	<u>3</u>	<u>2016</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)       

SIGNATURE: *Vincent J Gallo Jr*

DATE: 10/22/2021

52479

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----- PART II - SITEPLAN -----

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

Please  
See  
Attached

Notes: \_\_\_\_\_

\_\_\_\_\_

Site Plan submitted by: Vincent J. Gallo JR Agent: ☒ Owner: ☐ Date: 10/22/2021

Plan Approved X Not Approved \_\_\_\_\_ Date 10/26/21

By [Signature] COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



21-0885

