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

PERMIT NO. 21.0248  
DATE PAID: 3/12/21  
FEE PAID: 100.00  
RECEIPT #: 1637671

APPLICATION FOR:

[ ] New System [X] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ ]

APPLICANT: SCOTT TOWNE

AGENT:

TELEPHONE:

MAILING ADDRESS: 184 NW WHITE OAK GLEN LAKE CITY FL 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 INFORMATION

LOT: 12+13 BLOCK: SUBDIVISION: SPRING HOLLOW PLATTED:

PROPERTY ID #: 24-35-K-8217-005 ZONING: I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 1.3 ACRES WATER SUPPLY: [ ] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 184 NW WHITE OAK GLEN

DIRECTIONS TO PROPERTY:

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	UTILITY SHED	0	960	ORIGINAL ATTACHED
2				
3				
4				

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

SIGNATURE: Scott Towne

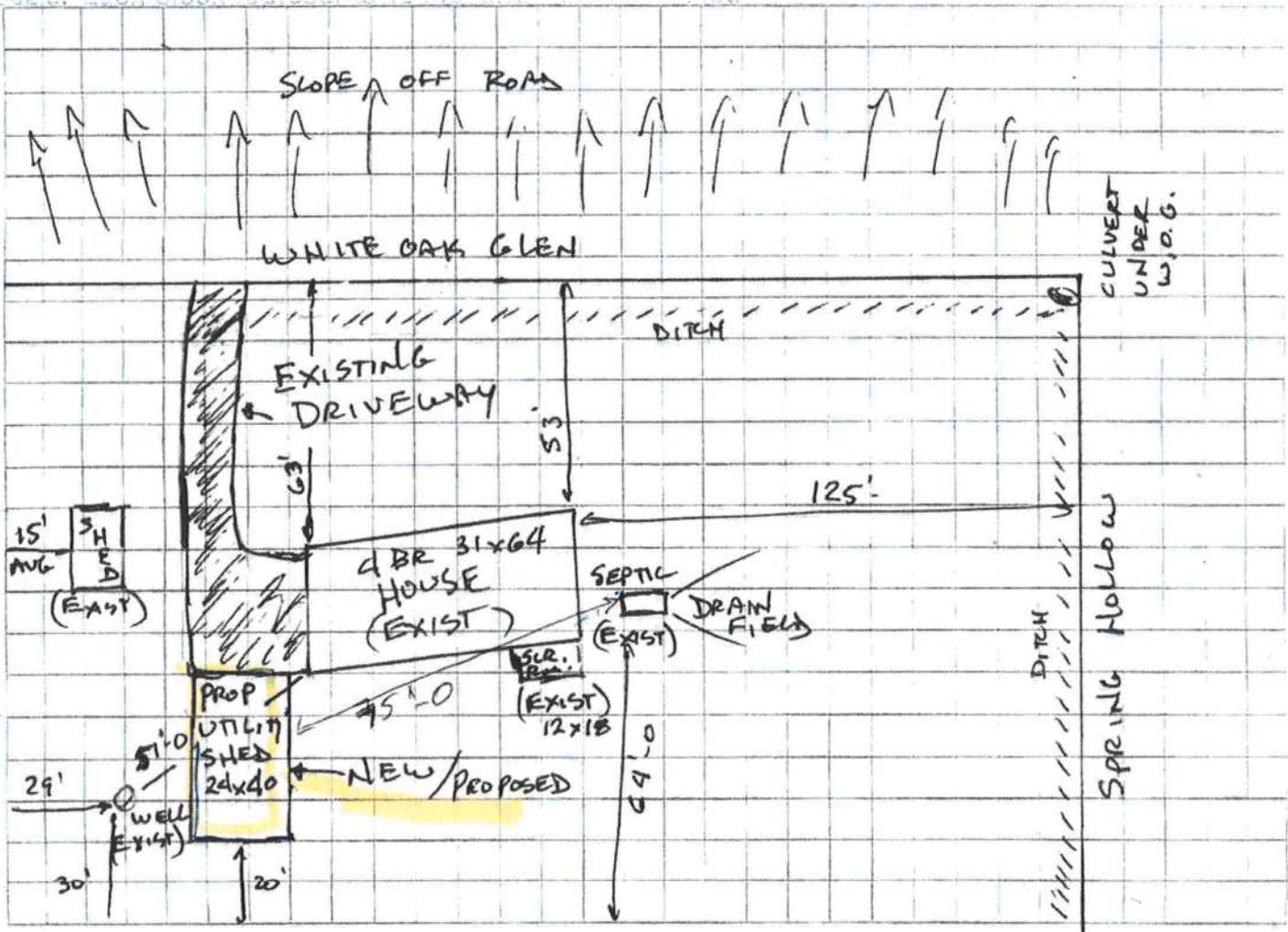
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-----PART II - SITEPLAN-----

Scale: Each block represents 12 feet and 1 inch = 12 feet



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

\* Site Plan submitted by: [Signature]  
Plan Approved ☒ [Signature]  
By: [Signature]

Not Approved \_\_\_\_\_

TITLE \_\_\_\_\_

DATE: 3/2/21

Date: 3/18/21

Columbia County Health Department