



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

PERMIT NO: 21-001
DATE PAID: 2/2/21
FEE PAID: 785.00
RECEIPT #: 112172054

APPLICATION FOR:

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

APPLICANT: Charlie Leshak (Eddie Grillo)

AGENT: Robert W Ford III NFST, INC TELEPHONE: 386-755-6372

MAILING ADDRESS: 7141 SE State Road 100 Lake City, FL 32025

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: 3 BLOCK: A SUBDIVISION: West Lake City Hills PLATTED: 1970

PROPERTY ID #: 34-35-16-02502-000 ZONING: MH I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 0.989 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] ☐ ≤2000GPD [] ☐ >2000GPD

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

PROPERTY ADDRESS: 615 NE Lake City Ave

DIRECTIONS TO PROPERTY: Hwy 90 W to Lake City Ave TR down to site on (R) 615

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	mhome	2	924	
2				
3				
4				

NO ORIGINAL
FOUND

☐ Floor/Equipment Drains ☐ Other (Specify) _____

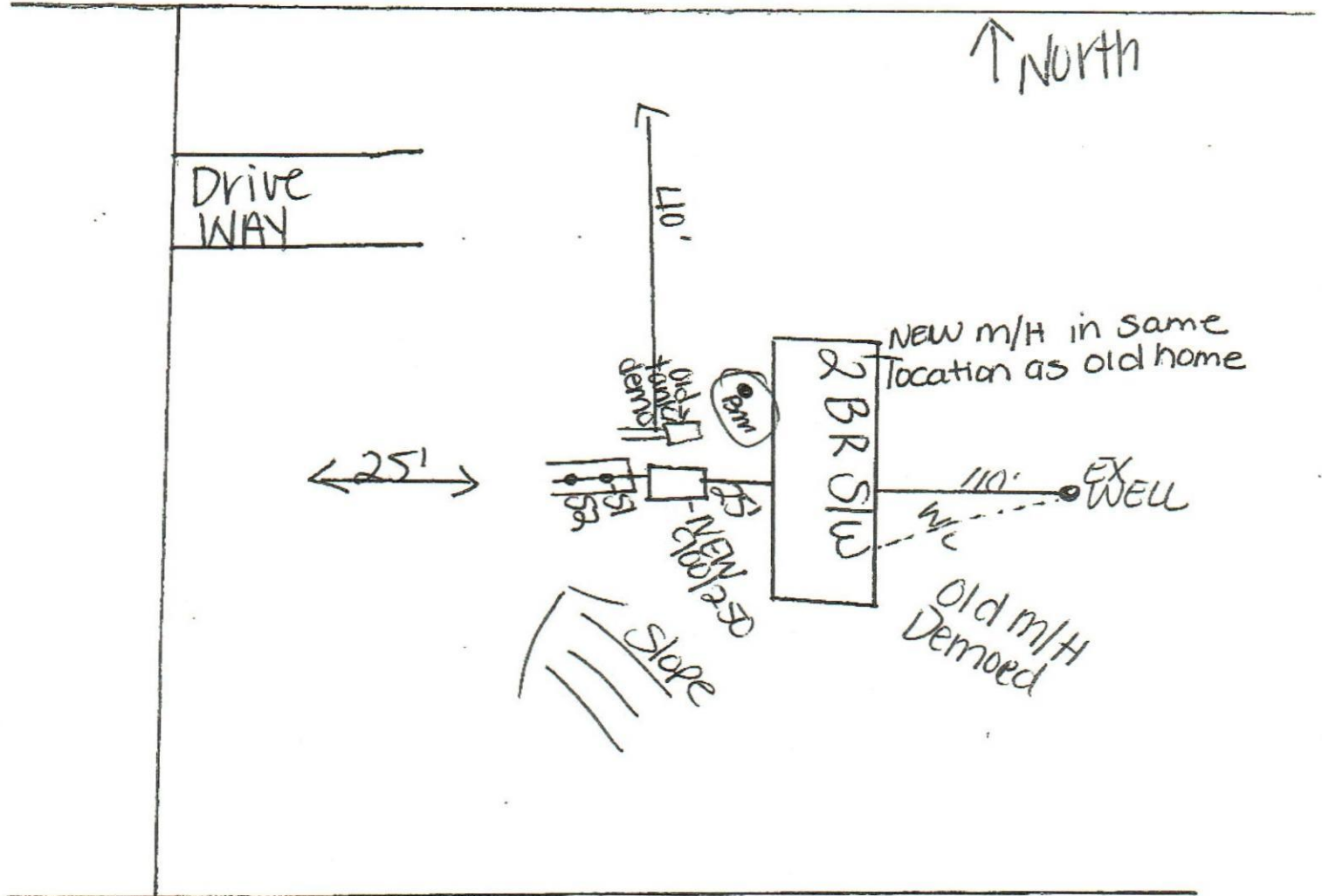
SIGNATURE: Robert W Ford III DATE: 2/1/21

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

21-0101

Grillo



Notes:

The Plan submitted by: Robert W. Ford III. Date 11/29/21

Plan Approved

Not Approved

Date

2/3/2021

by: K. R.

ES1

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT