

47443



**STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM**

APPLICATION FOR CONSTRUCTION PERMIT

CR # 10-7807

PERMIT NO. 20-0835
DATE PAID: 10-20-20
FEE PAID: 310.00
RECEIPT #: 1585429

APPLICATION FOR:

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

APPLICANT: HENRY GONZALEZ

AGENT: KDK PERMITTING

TELEPHONE: (386) 688-2345

MAILING ADDRESS: 1154 NW NOGEL RD.

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: 7 **BLOCK:** N/A **SUBDIVISION:** SAVANNA MEADOWS **PLATTED:** _____

PROPERTY ID #: 34-5S-16-03752-107 **ZONING:** RES **I/M OR EQUIVALENT:** ☐ NO ☐

PROPERTY SIZE: 5.000 ACRES **WATER SUPPLY:** ☒ PRIVATE **PUBLIC** ☐ **<=2000GPD** ☐ **>2000GPD**

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ **DISTANCE TO SEWER:** N/A FT

PROPERTY ADDRESS: 541 MORNING STAR GLN. FT. WHITE

DIRECTIONS TO PROPERTY:

SR 47 SOUTH PAST COLUMBIA CITY. TURN LEFT ON MORNING STAR GLN.
SITE APP. 1/4 MILE 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	MOBILE HOME	3	1,248	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

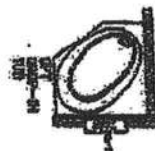
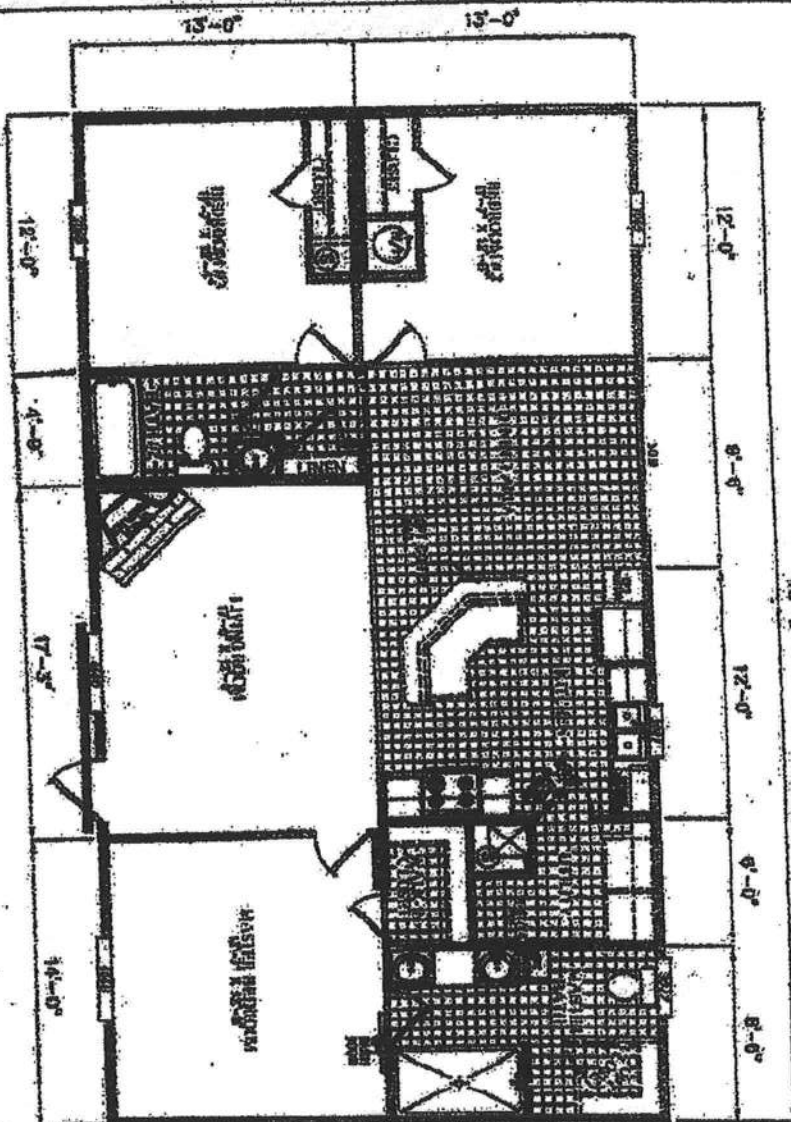
SIGNATURE: Buckley Hoer

DATE: 10/19/2020

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

Page 1 of 4

HITCH-END



DATE:	02/02/2010
VERSION:	14 09/28/2010

TOTAL	1.200 ft
LIVING SPACE	1.240 ft ²

UNIT SPECIFICATIONS:

GRAND SLAM!
27' x 12'
1. HURDLES / 2. BATH

OFFICIALS AND OFFICIALS, NUMBERS:

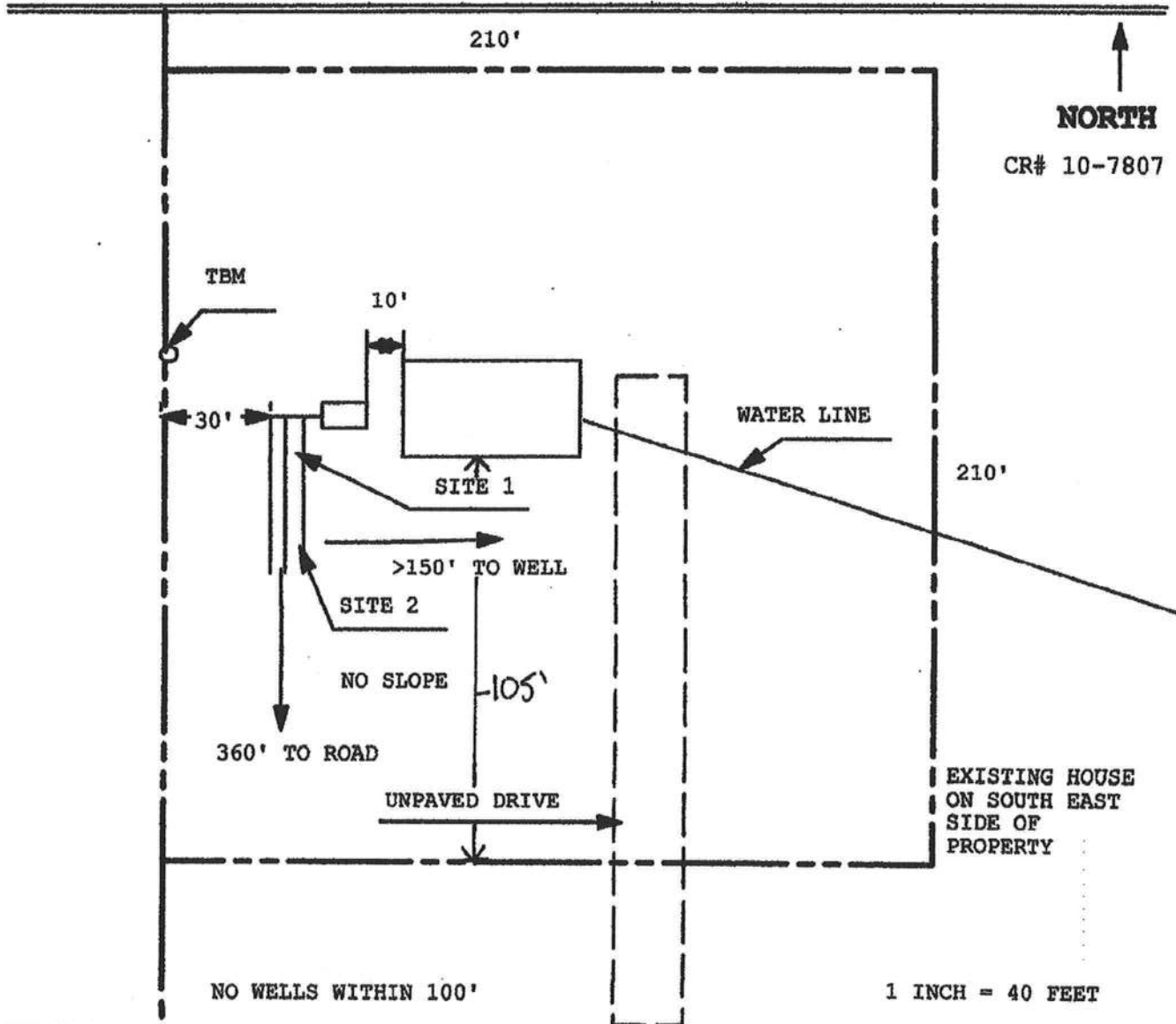
2848302 GSM

Unobit

HEMETS, INC.

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 20-0835

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Pamela R. [Signature] Date 10/16/20
 Plan Approved [Signature] Not Approved [Signature] Date 10/21/20
 By [Signature] Columbia CPHU
 Notes: _____