



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

PERMIT NO. 21-0108
DATE PAID: 1/19/21
FEE PAID: 60.00
RECEIPT #: 1615514

APPLICATION FOR:

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

APPLICANT: Courtney Koppel

AGENT: N/A

TELEPHONE: (352) 459-6806

MAILING ADDRESS: 42315 W Saffron Ct Eustis, FL 32726

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

No Tract
LOT: 1 BLOCK: SUBDIVISION: Dogwood Acres PLATTED:

PROPERTY ID #: 10-75-17-09974-324 ZONING: Ag I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 2.22 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS: 285 SE Rattler Ct., High Springs, FL 32643

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
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1	<u>Barn</u>	<u>0</u>	<u>864</u>	<u>ORIGINAL ATTACHED</u>
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☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: C. Koppel

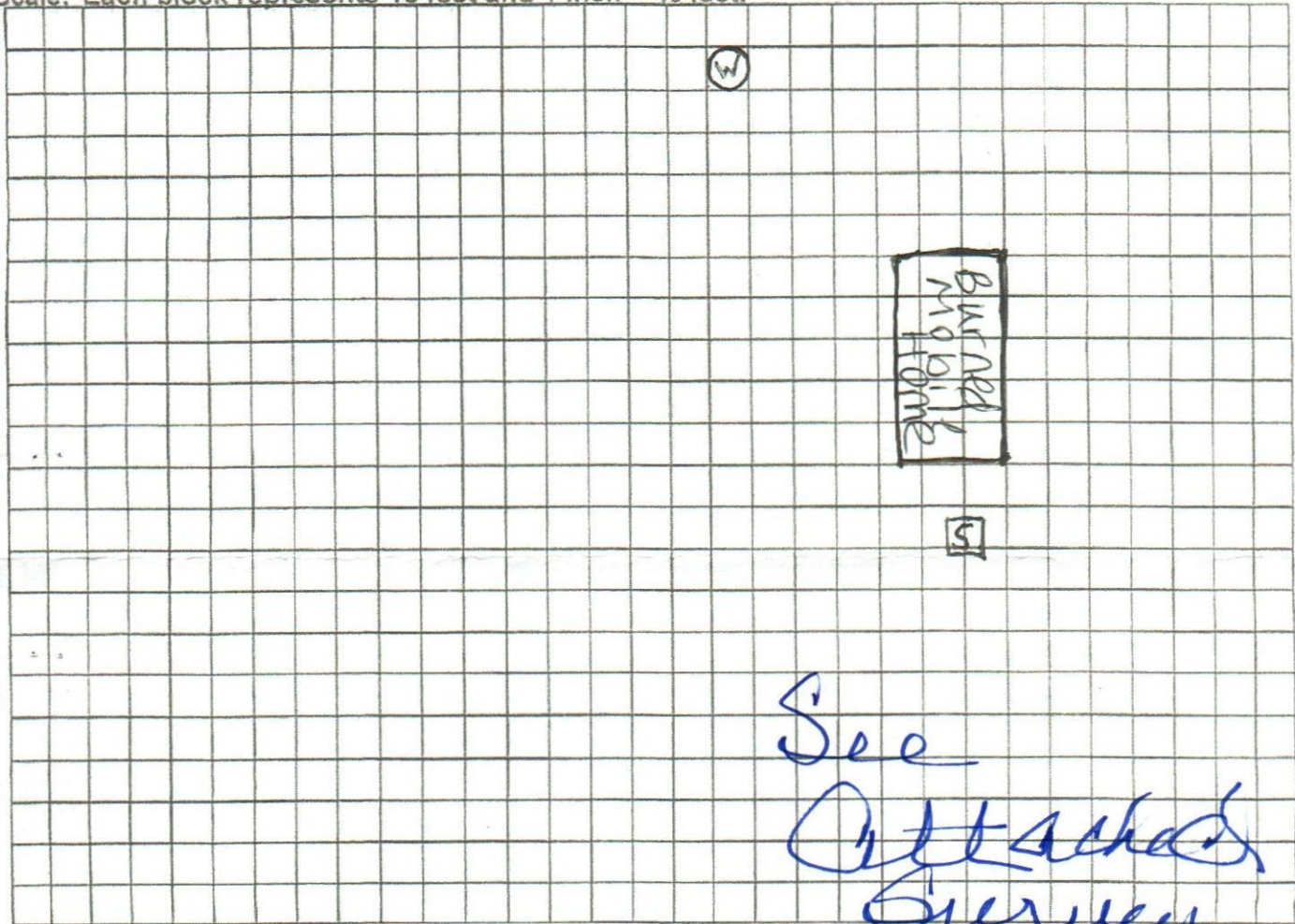
DATE: 1/8/2021

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-5558

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

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



Notes: _____

Site Plan submitted by: Courtney Koppel TITLE Owner DATE: 1/13/21
Plan Approved X Not Approved _____ Date 1/20/21
By [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

