

APP 1404-54

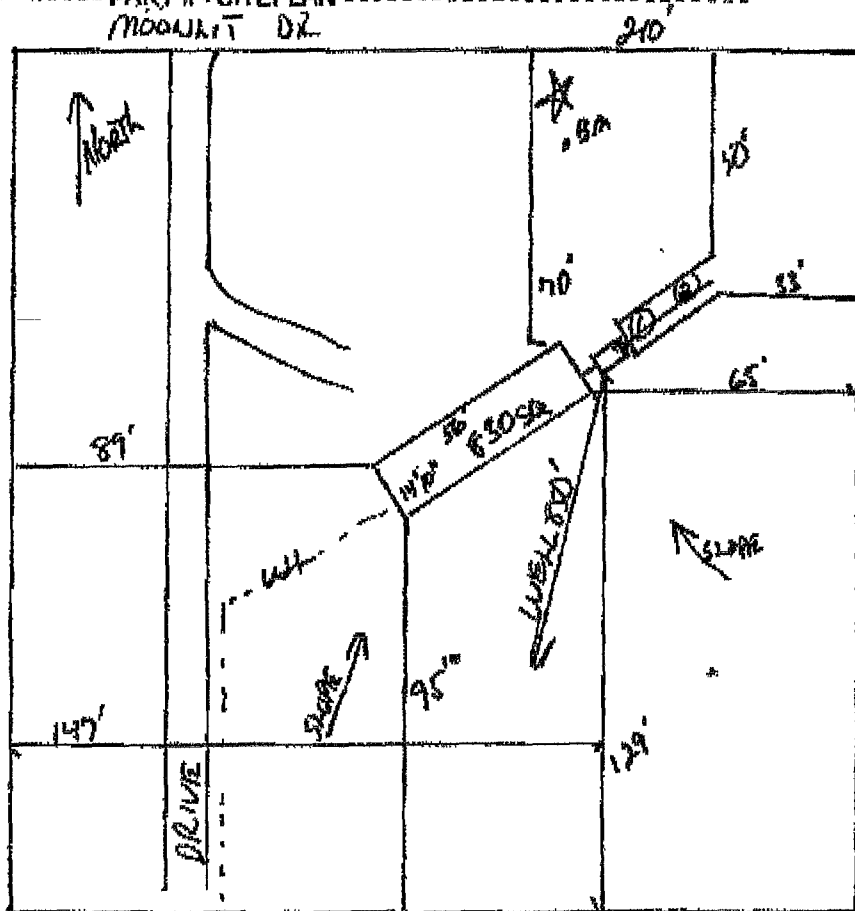
STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 14-2239

Bal/Flanna/Sexton

PART II - SITEPLAN  
MOBILE DR.

Scale: 1 inch = 40 feet.



Notes: 1 of 40.05 Acres SEE ATTACHED

Site Plan submitted by: Rocky D 7-D  
Plan Approved ☒ Not Approved ☐ Date 4.29.14  
By Salli Ford Env Health Director - Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

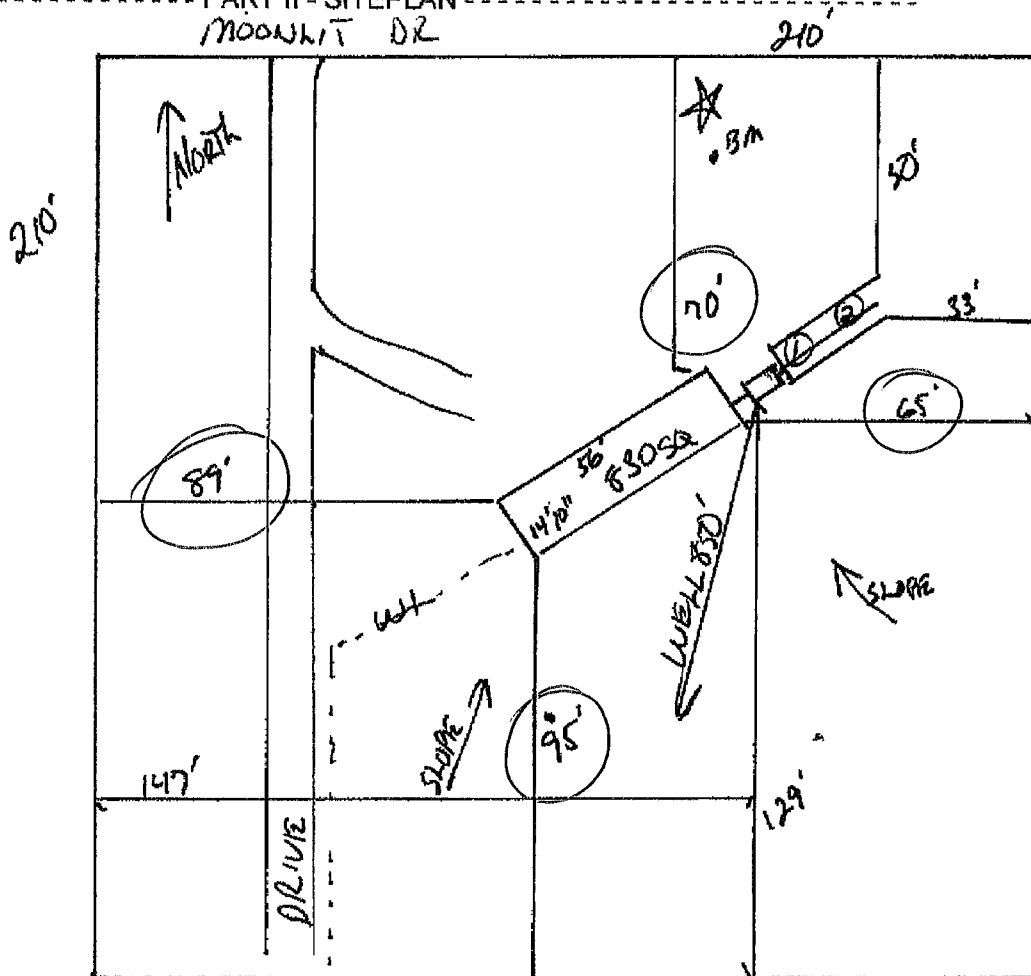
STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

*Dr. Flower/Sexton*

PART II - SITEPLAN  
MOONLIGHT DR

Scale 1 inch = 40 feet.



Notes: 1 of 40.05 Acres SEE ATTACHED

Site Plan submitted by *Rocky D F*

MASTER CONTRACTOR

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

Date \_\_\_\_\_

By \_\_\_\_\_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT