



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

PERMIT NO. 21-D841
DATE PAID: 10/14/21
FEE PAID: 100.00
RECEIPT #: 1757178

APPLICATION FOR:

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

APPLICANT: Advanta IRA Services, LLC

AGENT: Dale Burd

TELEPHONE: 386-365-7674

MAILING ADDRESS: 20619 County Road 137, Lake City, FL, 32024

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: NA BLOCK: NA SUBDIVISION: NA PLATTED: _____

PROPERTY ID #: 18-3S-17-05061-015 ZONING: _____ I/M OR EQUIVALENT: ☐ No ☐

PROPERTY SIZE: 4 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☒ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ No ☐ DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 184 NW McCall Terr, Lake City, FL, 32055

DIRECTIONS TO PROPERTY: Marion St north, TL CR 25-A, TR NW McCall Terr, 1st gate on left, to site in right

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	SF Residential / MH	2	840	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: _____

DATE: 10/13/2021

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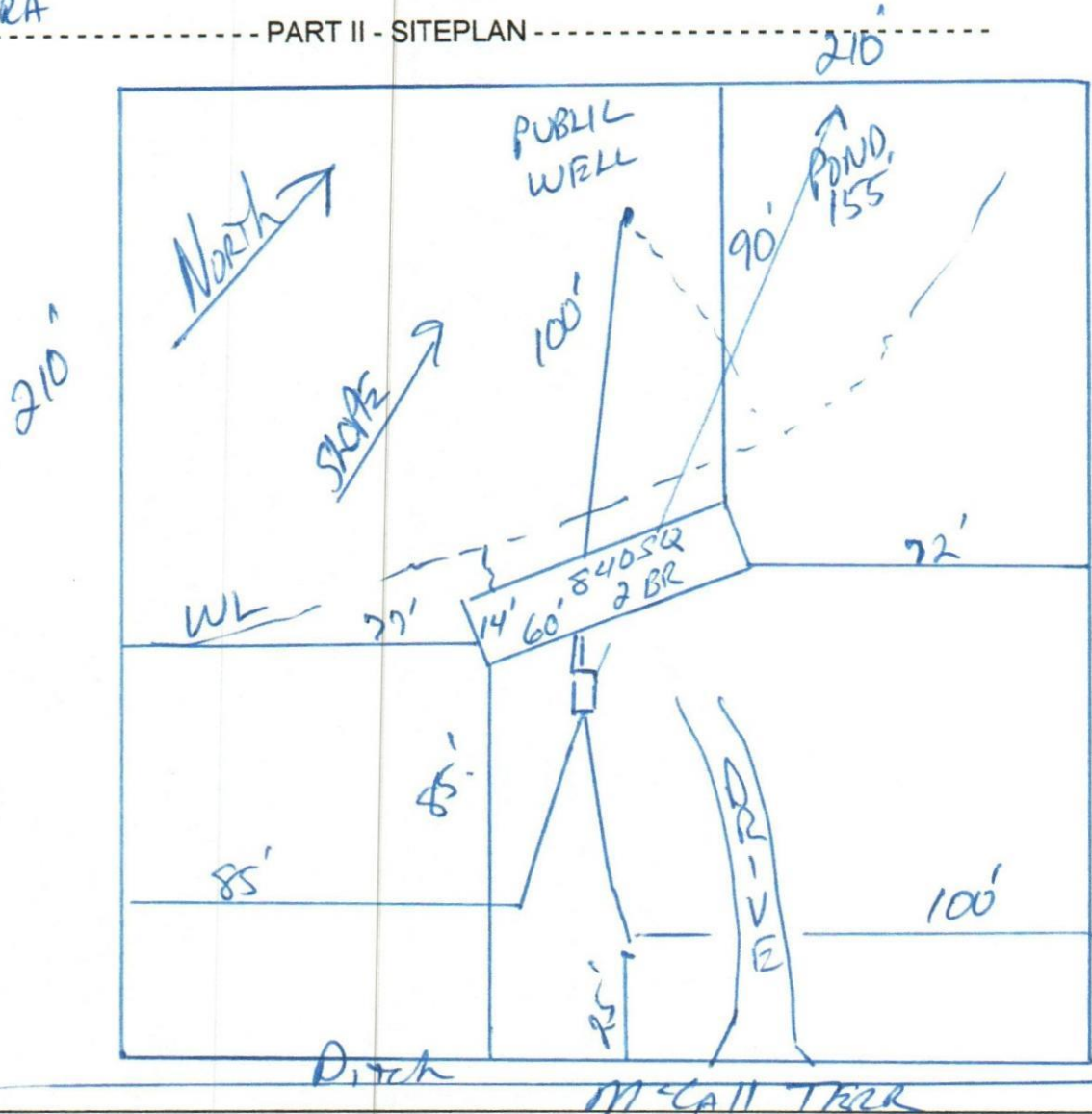
Permit Application Number

21-0841

AdvantaIRA

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

Site Plan submitted by:

Plan Approved ☒

By

Not Approved

CONTRACTOR

Date 10/14/21

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT