



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

PERMIT NO. 22-0449
DATE PAID: 5/18/22
FEE PAID: 60.00
RECEIPT #: 1835885

APPLICATION FOR:

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

APPLICANT: Eugene Spaziani / Tricia Spaziani

AGENT: _____ TELEPHONE: 214-980-4052

MAILING ADDRESS: 435 SW Ridge Street Lake City Fla 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: 2,344 BLOCK: _____ SUBDIVISION: Oak Ridge Estates 4A PLATTED: _____

PROPERTY ID #: 25-45-16-0385-002 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 16 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

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

PROPERTY ADDRESS: 435 SW Ridge St Lake City FL 32024

DIRECTIONS TO PROPERTY: 47 South to Ridge Rd

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	<u>Storage Building</u>	<u>0</u>	<u>4,500</u> <u>50x90</u>	<u>ORIGINAL ATTACHED</u> <u>built 1985</u>
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Eugene Spaziani DATE: 5/16/22

THE UNIVERSITY OF CHICAGO
LIBRARY
540 EAST 57TH STREET
CHICAGO, ILL. 60637

TO THE PRESIDENT OF THE UNIVERSITY OF CHICAGO
FROM THE DEAN OF THE FACULTY
SUBJECT: [Illegible]

[The following text is extremely faint and largely illegible. It appears to be a formal letter or report, possibly discussing university affairs, faculty matters, or a specific incident. Key words like "Dean", "Faculty", "University", and "Subject" are visible at the beginning.]

Very truly yours,
[Illegible Signature]

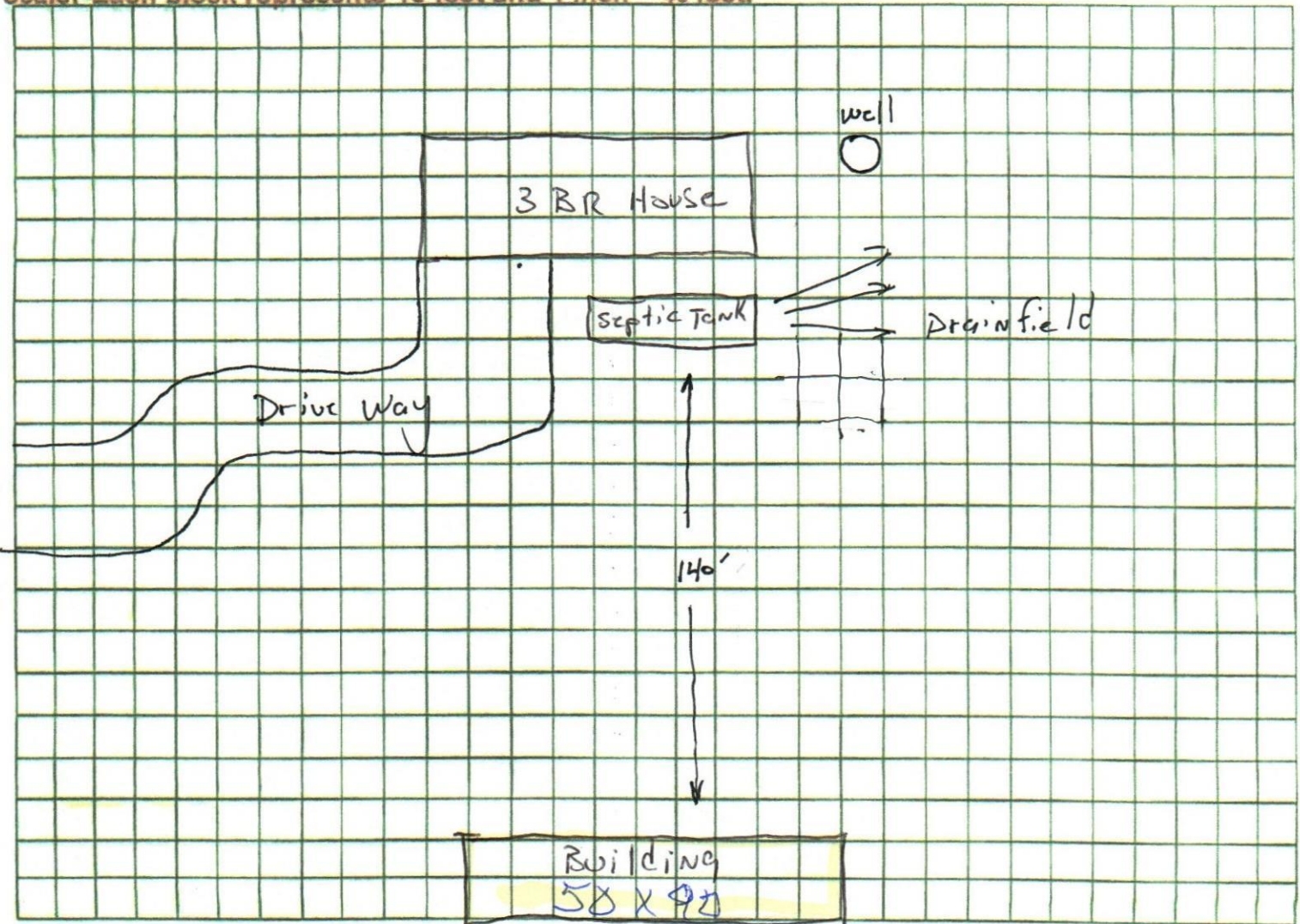
[Illegible text at the bottom of the page, possibly a date or reference number.]

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Permit Application Number 22-0449

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

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



Notes: _____

Site Plan submitted by: Eugene Spaziani TITLE _____ DATE: 5/16/22
Plan Approved ☒ Not Approved _____ Date 5/24/22
By [Signature] **Columbia CHD** County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

