



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

FW

PERMIT NO. 21-0847
DATE PAID: 10/15/21
FEE PAID: 310.00
RECEIPT #: 1757305

APPLICATION FOR:

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

APPLICANT: Timothy and Roselan Neidert

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: 45 BLOCK: NA SUB: Cross Roads PLATTED: _____

PROPERTY ID #: 12-6S-16-03816-145 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 10.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 710 SW Scout Gln, Fort White, Fl

DIRECTIONS TO PROPERTY: TL onto US-41S, TR onto FL-47, TL onto SW Herlong St, TR onto Old Wire Rd, TL onto SW Scout Gln

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	3	1720	
2				
3				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: _____

DATE: 10/14/2021

STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 21-0847

Neidert

PART II - SITEPLAN

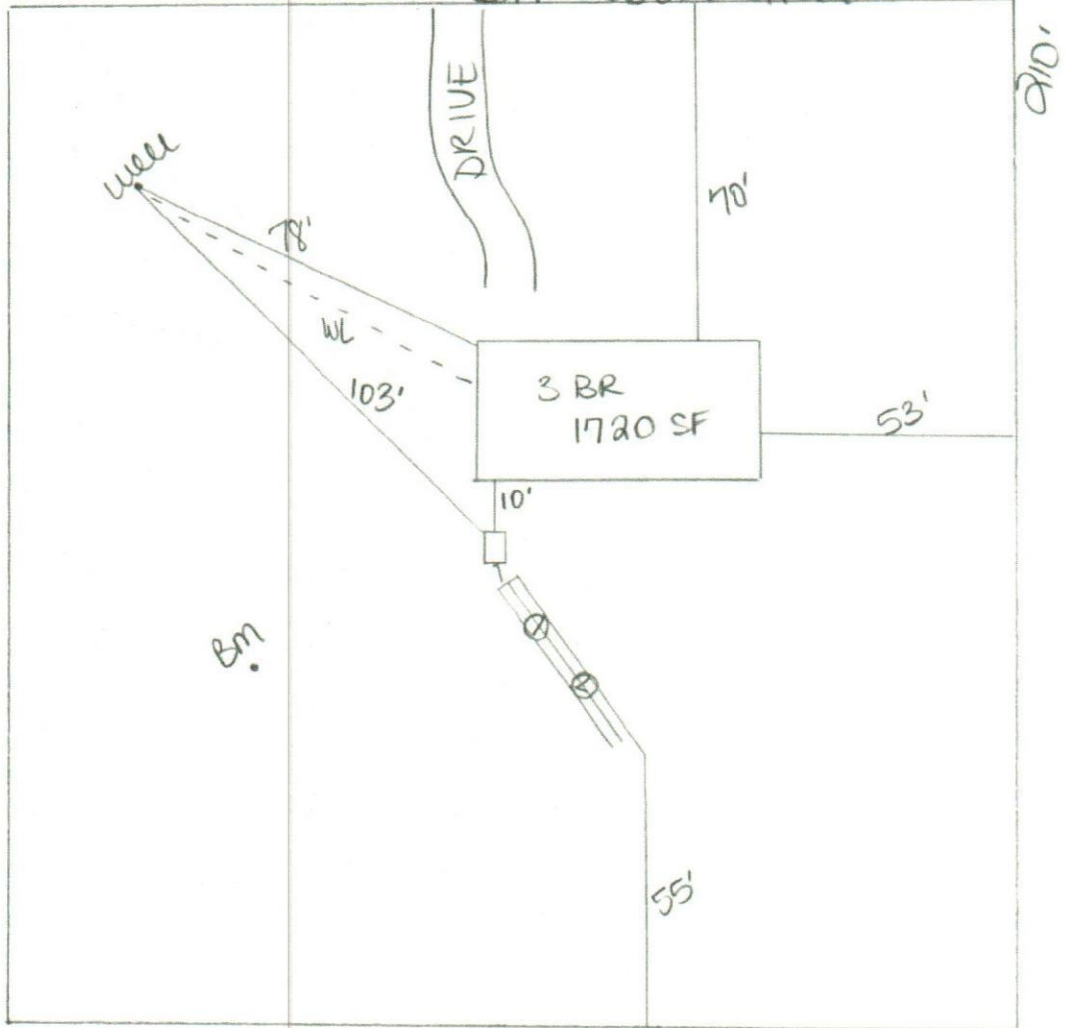
SW Scott Green 210'

Scale: 1 inch = 40 feet.

↑ N



1 acre of 10.01



Notes: 1 acre of 10.01

Site Plan submitted by: William D. Bishop II MASTER CONTRACTOR
Plan Approved ✓ Not Approved _____ Date 10-14-21
By [Signature] ES2 Columbia County Health Department
1015121

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT