



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

PERMIT NO. 20-0589
DATE PAID: 7/24/07
FEE PAID: 6000
RECEIPT #: 1527230

APPLICATION FOR:

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

APPLICANT: Margaret Parsell

AGENT: Brittany Dunn

TELEPHONE: 678.340.6760

MAILING ADDRESS: 159 SW Groveland Ct. 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: 40 BLOCK: _____ SUBDIVISION: Callaway Ph 2 PLATTED: Y

PROPERTY ID #: 15.4S.16.03023 240 ZONING: R I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☒ $\leq 2000\text{GPD}$ ☐ $> 2000\text{GPD}$

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

PROPERTY ADDRESS: 159 SW Groveland Ct., Lake City, FL 32024

DIRECTIONS TO PROPERTY: West on US 90, Left on CR 252B.
Left on Callaway Dr SW, and Left on SW Groveland Ct.

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>SFR</u>	<u>4</u>	<u>2478</u>	
2	<u>proposed shed</u>	<u>n/a</u>	<u>600</u>	
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: [Signature] DATE: 7.17.07

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

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

Purcell

See
Attached

Notes: _____

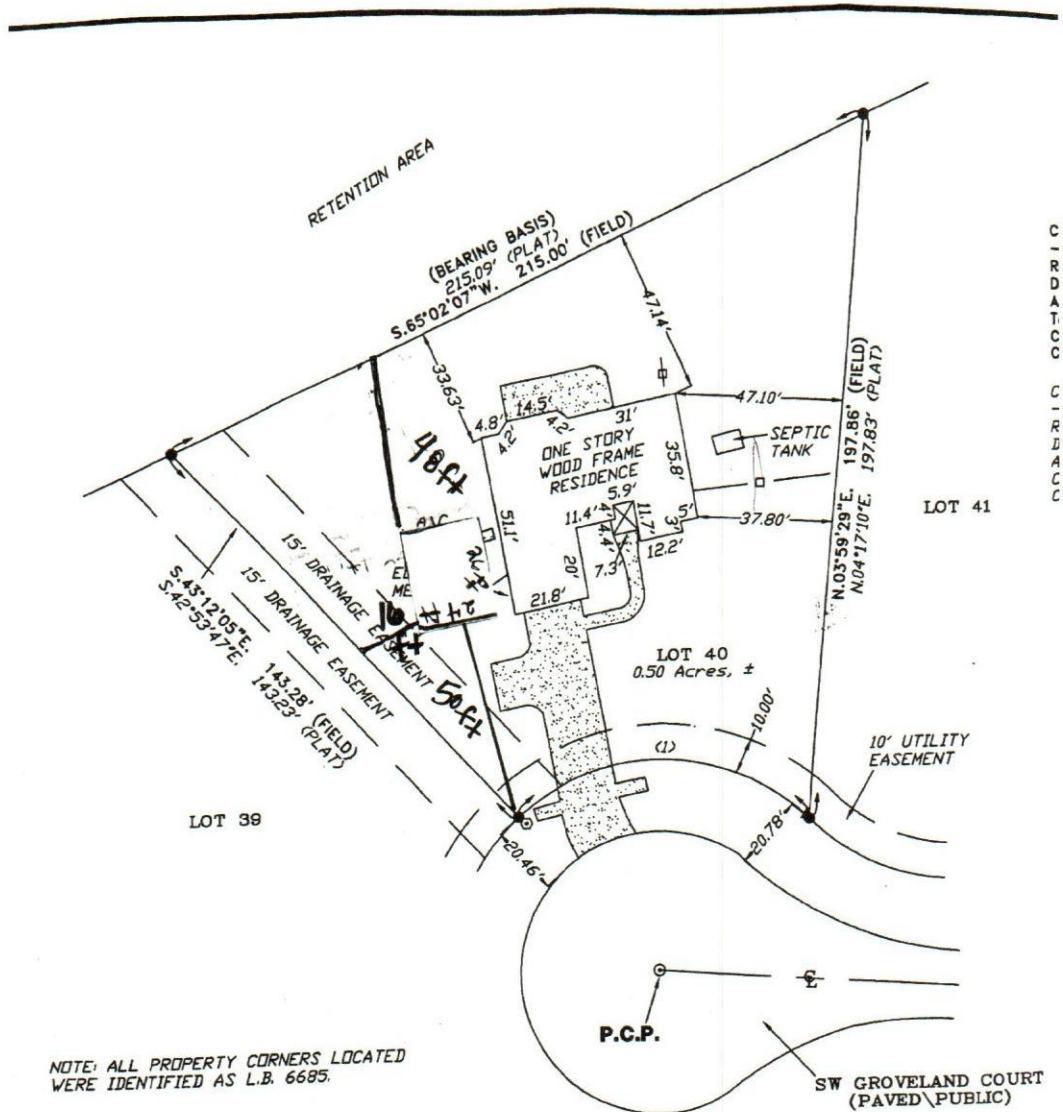
Site Plan submitted by: B. Gunn Agent: ☒ Owner: _____ Date: 7.23.20

Plan Approved [Signature] Not Approved _____ Date 7/23/20

By [Signature] COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

20-0589



NOTE: ALL PROPERTY CORNERS LOCATED WERE IDENTIFIED AS L.B. 6685.

G. G. G. 7.23.20 24x26 open building w/ concrete

CERTIFIED TO:
MARGARET A. & DAILEY L. PARSELL
ABSTRACT TRUST TITLE, LLC
FIDELITY NATIONAL TITLE INSURANCE COMPANY

FIELD BOOK: 363 PAGE(S): 39

SURVEYOR'S CERTIFICATE
I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA IN CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CODE, P.U.
07/18/19 08/02/19
FIELD SURVEY DATE DRAWING DATE
NOTE: UNLESS IT BEARS THE ORIGINAL SIGNATURE AND THE 1 AND MAPPER THIS DRAWING, SKETCH, PLAT OR MAP IS