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

PERMIT NO: 22-0842
DATE PAID: 10/11/22
FEE PAID: 60.00
RECEIPT #: 1904420

APPLICATION FOR:
[ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [X] Storage Building

APPLICANT: Mary Jankowski

AGENT: Krista McGuire TELEPHONE: 352-672-8552

MAILING ADDRESS: 176 SW Polaris Ter. Fort 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: NA BLOCK: NA SUBDIVISION: NA PLATTED: NA

PROPERTY ID #: #13-7S-16-04203-013 Tax District ZONING: 003 I/M OR EQUIVALENT: [Y/N]

PROPERTY SIZE: 6.64 ACRES WATER SUPPLY: [√] (PRIVATE) PUBLIC [ ]<=2000GPD [ ]>2000GPD

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

PROPERTY ADDRESS: 176 SW Polaris Ter. Fort White, Fl 32038

DIRECTIONS TO PROPERTY: From High springs 27 N towards Fort White. Take a left onto Shiloh St. (Shiloh Baptist Church on Corner) Left onto Polaris Ter. 2nd house on right.

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Storage building	0	~~1,200~~ 1,200	Metal/steel building
2				-ORIGINAL ATTACHED
3				
4				

[X] (Floor)/Equipment Drains [ ] Other (Specify) Cement

SIGNATURE: Mary Jankowski DATE: 10-10-22

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

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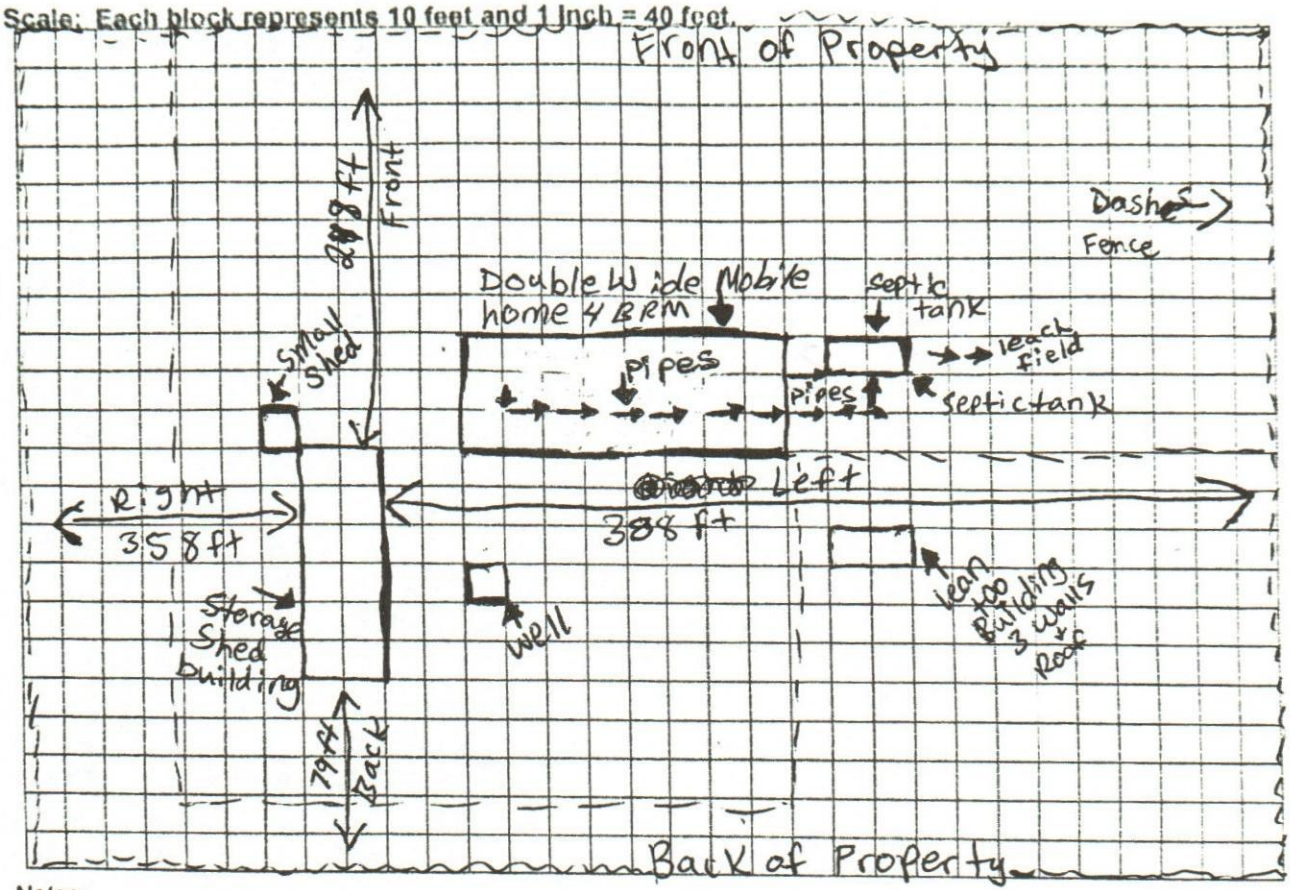
Permit Application Number ~~55432~~

PART II - SITEPLAN

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



Notes: _____

Site Plan submitted by: ~~Mary Jankowski~~ Agent: Kristy McGuire Owner: Mary Date: 08-31-22

Plan Approved ✓ Not Approved _____ Date 10.19.22

By Sallie Ford EH Director COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 5744-002-4015-6)