



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM

CR # 10-8737

PERMIT NO. 22-0206
DATE PAID: 3/17/22
FEE PAID: 31000
RECEIPT #: 1810413

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: BRIAN AND AIMEE DICKS

AGENT: PAUL LLOYD

TELEPHONE: (386) 365-8881

MAILING ADDRESS: 274 SW FAMILY ROAD LAKE CITY FL

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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED: _____

PROPERTY ID #: 13-5S-17-09223-002 ZONING: RES I/M OR EQUIVALENT: [NO]

PROPERTY SIZE: 5.000 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [NO] DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 404 FAMILY ROAD

DIRECTIONS TO PROPERTY:

TAKE 90 EAST. TURN RIGHT ON HIGHWAY 100. TURN RIGHT ON PRICE CREEK. TURN LEFT ON FAMILY ROAD. SECOND ON 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	<u>HOUSE</u>	<u>3</u>	<u>2653</u> <u>2,640</u>	
2				
3				
4				

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

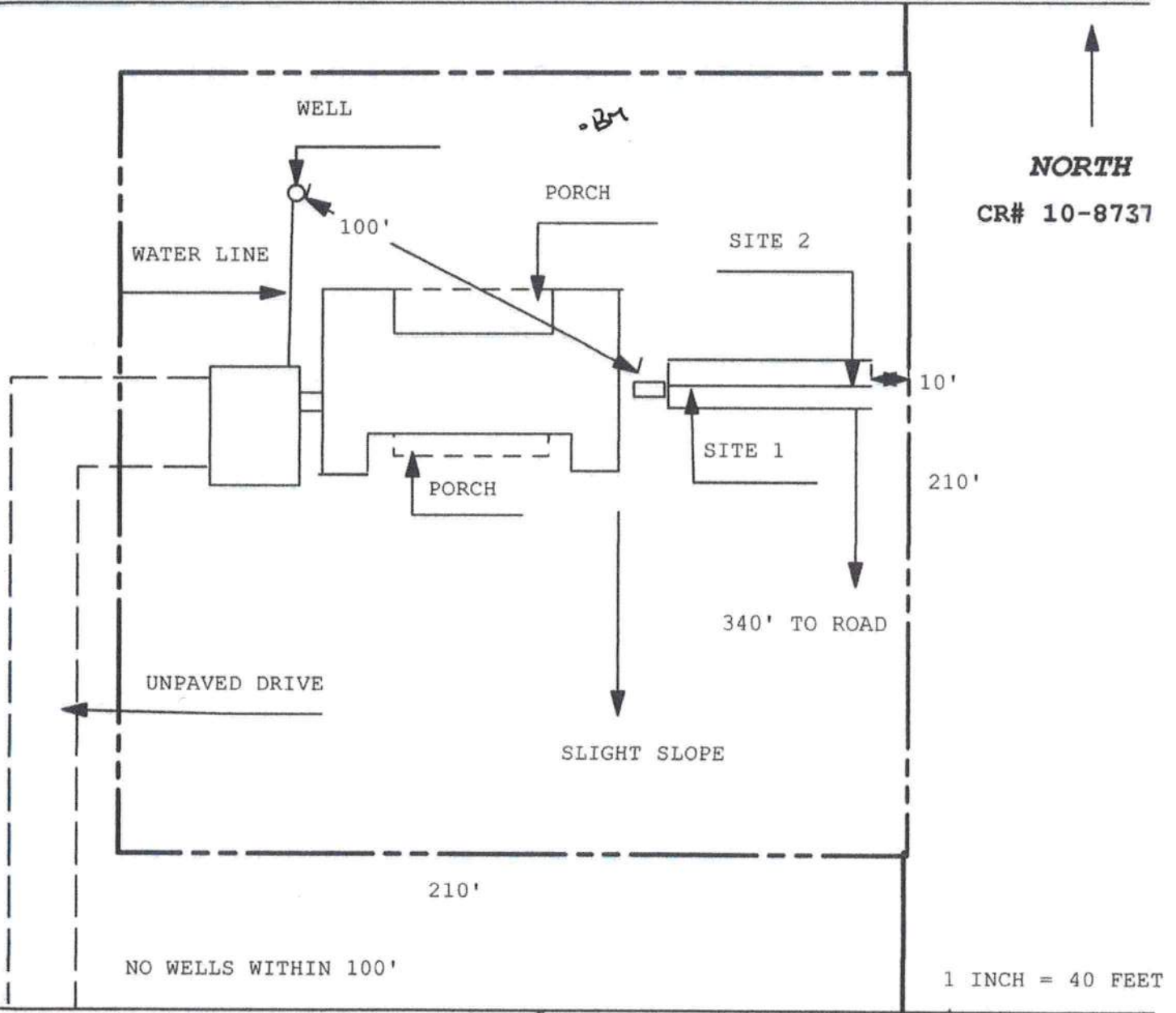
SIGNATURE: Paul Lloyd

DATE: 3/9/22

54123

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
 Permit Application Number: 22-0204

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Rand R. Boyd Date 3/11/22
 Plan Approved Not Approved Date 3/15/22

By [Signature] ES2 Columbia CPHU

Notes: _____