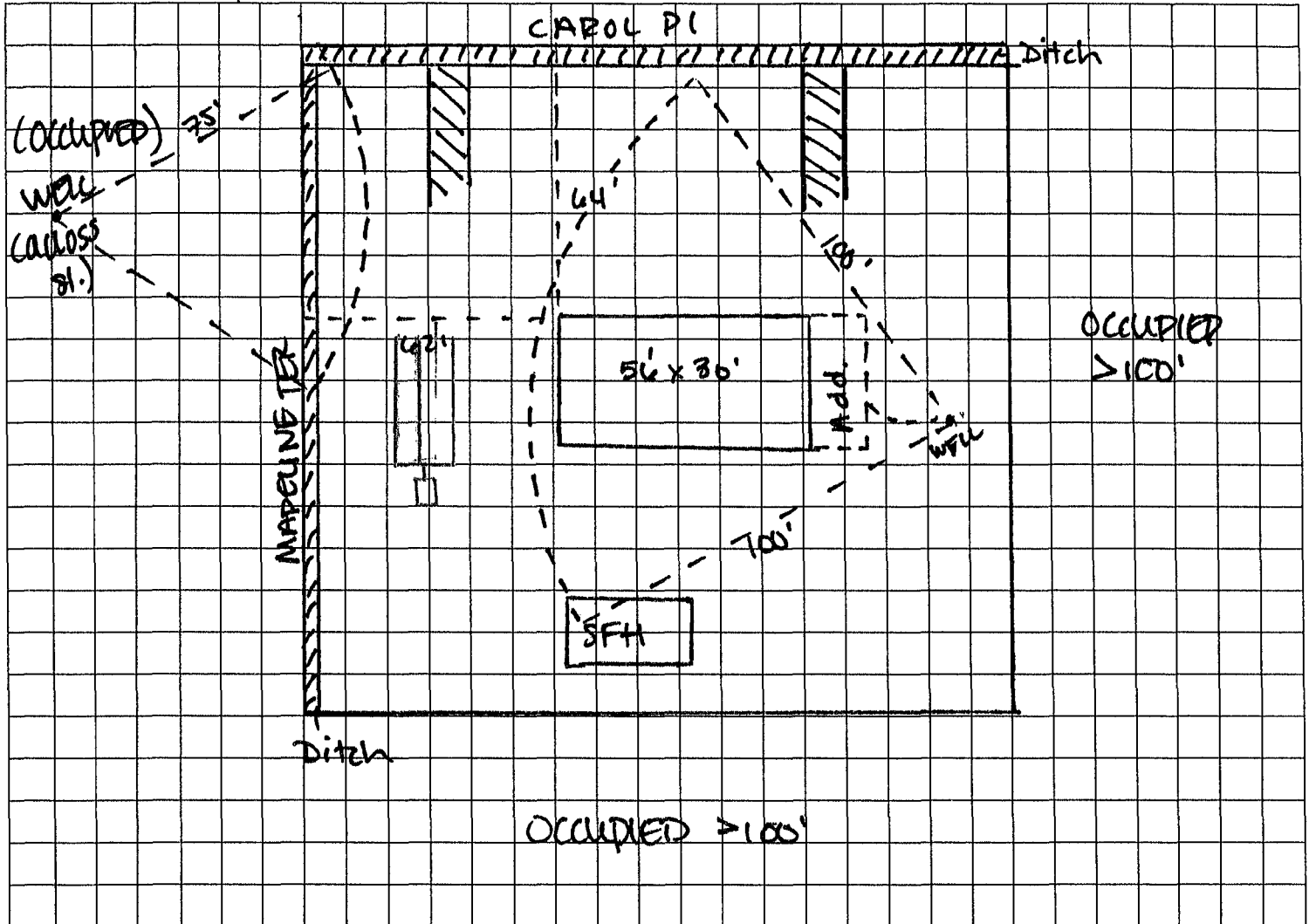


Permit Application Number 13-0281

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



Notes: _____

Site Plan submitted by:

~~Plan Approved.~~

Not Approved_____

Date 7/18/13

~~By~~

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SSO 129801325



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

PERMIT NO. 18-4381
DATE PAID: 5/9/13
FEE PAID: 425.01
RECEIPT #: 1107417

APPLICATION FOR:

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

APPLICANT: EVANGELISTIC DELIVERANCE/MIRACLES REVIVAL CENTER INC
AGENT: Robert L. Ogles / contractor Builder TELEPHONE: 386-364-4838
MAILING ADDRESS: 256 NW CAROL PL. LAKE CITY FL. 32055

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: 28 BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 28-35-16-02366-031 ZONING: 007100 I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: .62 ACRES WATER SUPPLY: [☒] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 256 NW CAROL PL. LAKE CITY FL.

DIRECTIONS TO PROPERTY: West on US 90 to Brown Rd. Then Right go to Carol Pl. Then Left go to Church on Left

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>Church</u>	<u>N/A</u>	<u>600</u>	<u>600 seats / no meals</u>
2				
3				
4				

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

SIGNATURE: Robert L. Ogles DATE: 5-8-13