



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

21-0981

PERMIT NO.	
DATE PAID:	60.00
FEE PAID:	1271.81
RECEIPT #:	1302446

APPLICATION FOR:

II New System Repair

Existing System
Abandonment

[]	Holding Tank
[]	Temporary

Innovative
Life-Like.

APPLICANT:

Michael Smith.

AGENCY:

HAL	Customer Service, LLC
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TELEPHONE: (386) 984-9334

MAILING ADDRESS:

301 SW Faul CT, Lake City, FL, 32024
(heidemann20@gmail.com)

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (a) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLANTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 27 BLOCK: 2 SUBDIVISION: Suzanne PLAT/RECORD:

PROPERTY ID #: 08-045-17-07570-061 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 0.46 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [☒] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, IS? [Y/N]

PROPERTY ADDRESS: 232 SE Scarlett Way, Laite City

DIRECTIONS TO PROPERTY: Turn (L) onto N Marion Ave, Turn (R) onto E Duval St,
Take slipway (R) Turn onto SR-100, Turn (R) onto SE CR 245, Turn (R) onto SE Plant St
Turn (L) onto SE Scarlett way, Destination is on your (R)

BUILDING INFORMATION

[] RESIDENTIAL

[] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Industrial/Institutional/Residential
1	Old mobile home	2b, 2bath	1040 sq ft	ORIGINAL ATTACHED
2	New mobile home	2b, 2bath	1144 sq ft	
3				
4				

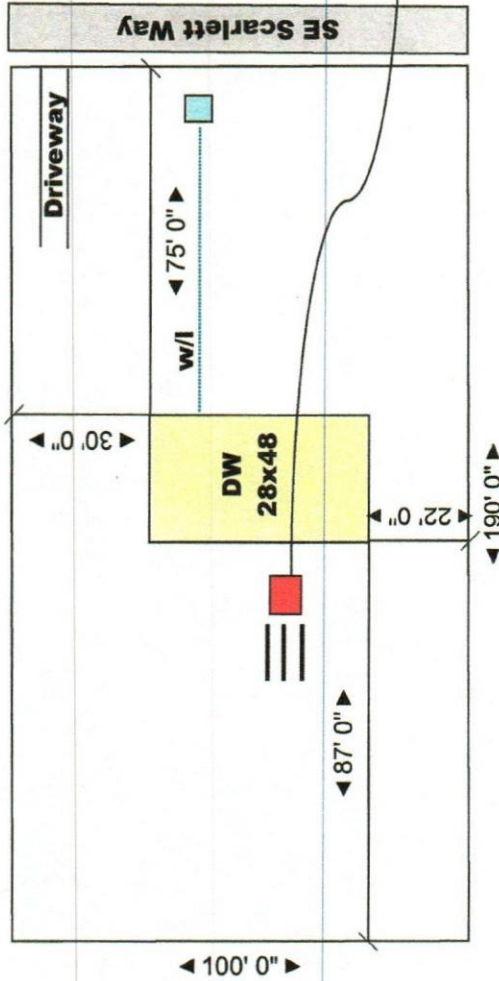
☒ Floor/Equipment Drains ☐ Other (Specify)

DATE 11/29/20

21-0981



Parcel ID: 03-4S-17-07570-061



Columbia CDD
APPROVED
12/2/21

Site: 232 SE Scarlett Way, Lake City	Drawing: 80232	Project: 00232	Drawn: Heide M	Notes: H&L Customer Service, LLC 301 SW Faul Ct Lake City, FL, 32024 (386)984-9334
	Scale: 1"=40'	Date: 11/22/21	Rev: A	
Title: Michael Smith				

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