



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

PERMIT NO. 14-0385 DATE PAID: 8/4/14 FEE PAID: 310.00 RECEIPT #:

APPLICATION FOR:

- [x] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []

APPLICANT: Jerry Scott Case

AGENT: Elliot Bronson

TELEPHONE: 386-688-1063

MAILING ADDRESS: 13082 63RD LANE NORTH WEST PALM BEACH, FL 33412

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: 22 BLOCK: NA SUBDIVISION: Tustenugee Trace PLATTED:

PROPERTY ID #: 07-6S-17-03816-422 ZONING: Ag I/M OR EQUIVALENT: [No]

PROPERTY SIZE: 10.02 ACRES WATER SUPPLY: [x] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [No] DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 100 SW NUTHATCH CT FORT WHITE FL 32038

DIRECTIONS TO PROPERTY: From Lake City take US 441 South then turn right on SW Tustenugee Ave. Continue 15 miles to then turn right on SW Jasmine St. continue 0.8 mile to property on the right.

BUILDING INFORMATION

[x] RESIDENTIAL [] COMMERCIAL

Table with 5 columns: Unit No, Type of Establishment, No. of Bedrooms, Building Area Sqft, Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC. Row 1: 1, Shop With Apartment, 2, 972.

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

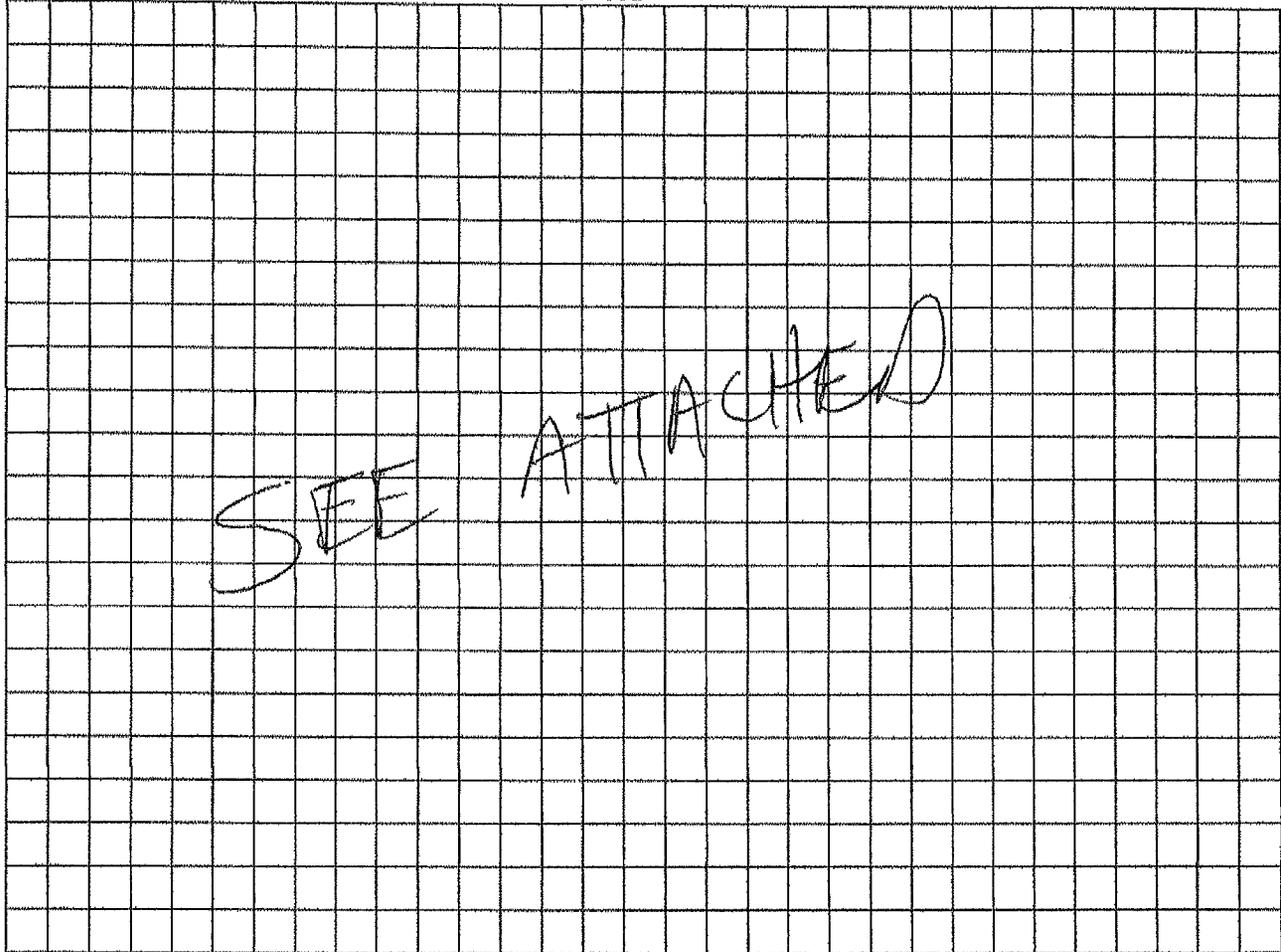
SIGNATURE: Elliot Bronson DATE: 7-30-14

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 14-0385

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

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



Notes: _____

Site Plan submitted by: Elliot Bronson

Plan Approved Not Approved Date 8/15/14

By: [Signature] Columbus County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

1 Ac of 10.02 Ac



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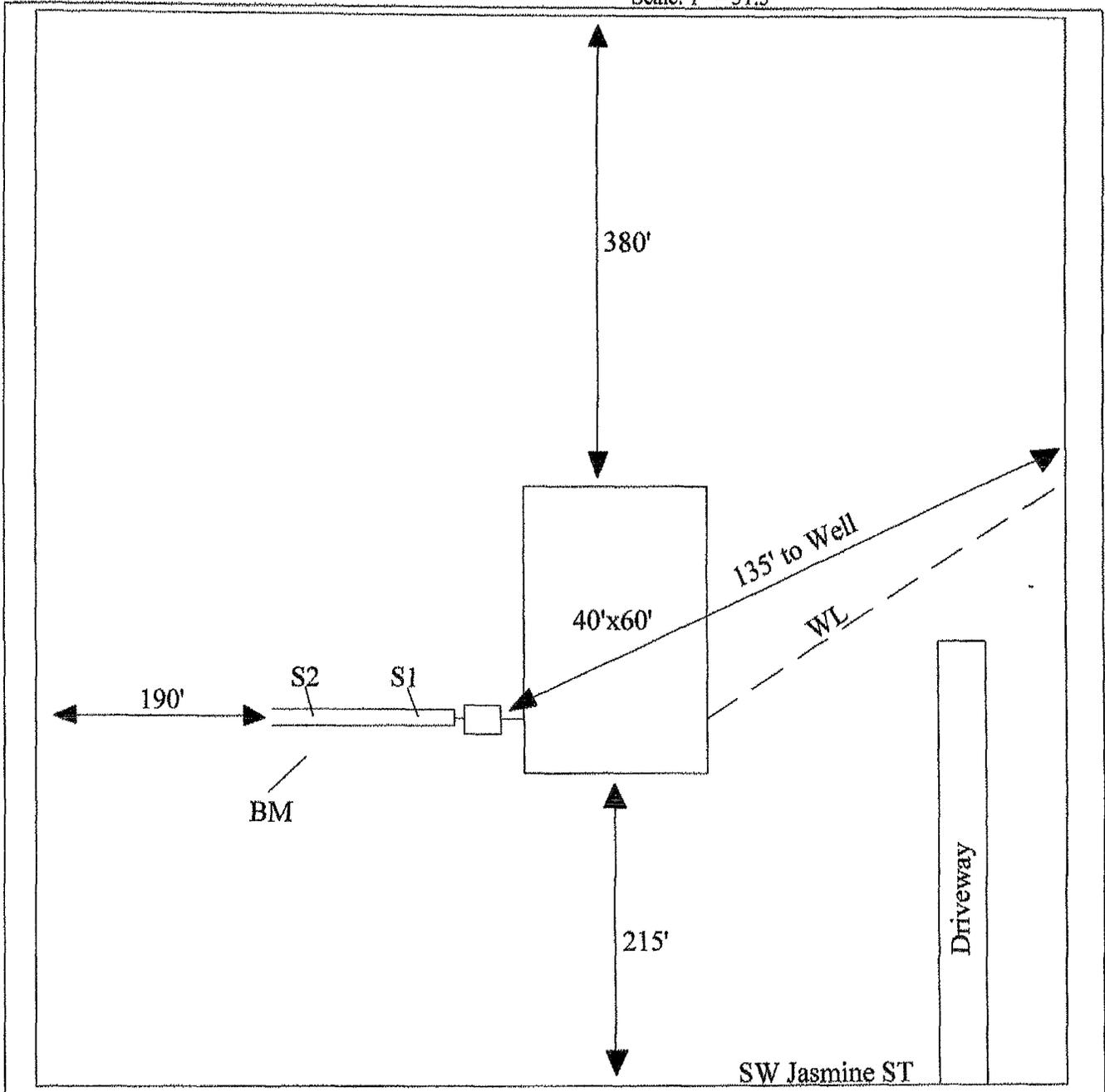
PART II SITE PLAN

PERMIT APPLICATION NUMBER 14-0385

APPLICANT: Jerry Scott Case



Scale: 1" = 31.5'



NOTES:

SITE PLAN SUBMITTED BY: Elliot Bronson
ELLIOT BRONSON 13-1789

PLAN APPROVED ✓ NOT APPROVED _____ DATE 8/15/14

BY: [Signature] Chetina COUNTY HEALTH DEPARTMENT