



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

PERMIT NO. 20-2643  
DATE PAID: 8/10/20  
FEE PAID: 310.30  
RECEIPT #: 558696

APPLICATION FOR:

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

APPLICANT: Earl Martin (Smith)

AGENT: North Florida Septic Tank Inc;

TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE State Road 100 Lake City, Fla 32025

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: 44 BLOCK: 1 SUBDIVISION: Unit 23 Three Rivers E PLATTED: 1967

PROPERTY ID #: 01432-044 ZONING:            I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 0.918 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: 2 FT

PROPERTY ADDRESS: 935 SW Kentucky St FW Fla

DIRECTIONS TO PROPERTY: take 2475 and Sand Hill Rd to SW Riverside Av take Utah Pkwy and SW Newark Dr to SW Kentucky St to 935

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	RV	1	248	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)           

SIGNATURE: Wm J. [Signature] DATE: 8-6-2020



## Permit Application Number.

20-0443

Martin | Smith

1 inch = 40 feet.

400'

100'

Drive

200'

90°

30'

Slope

N

S

400'

Site Kentucky St.

Notes: \_\_\_\_\_

Plan Approved

Not Approved

Date 8/12/20

By \_\_\_\_\_

Columbia CHD

County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**