



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

PERMIT NO. 21-1061
DATE PAID: 12/29/02
FEE PAID: 288.80
RECEIPT #: 1772923

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Dale Houston

AGENT: Sonya North

TELEPHONE: 386-623-6522

MAILING ADDRESS: 909 SW Norris Ave Lake City FL 32024

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: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: DL-5516-03480-005 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 5 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 909 SW Norris Ave Lake City FL 32024

DIRECTIONS TO PROPERTY: L on Marion, R on 90 W, L on 247 S, L on SW Norris Ave, property on L

BUILDING INFORMATION

[X] 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>Mobile Home</u> | <u>3</u> | <u>11680</u> | |
|---|--------------------|----------|--------------|--|

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| 4 | | | | |
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ORIGINAL ATTACHED

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

SIGNATURE: Sonya North

DATE: 12/28/01

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-18601

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

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

See
Attached

Notes: _____

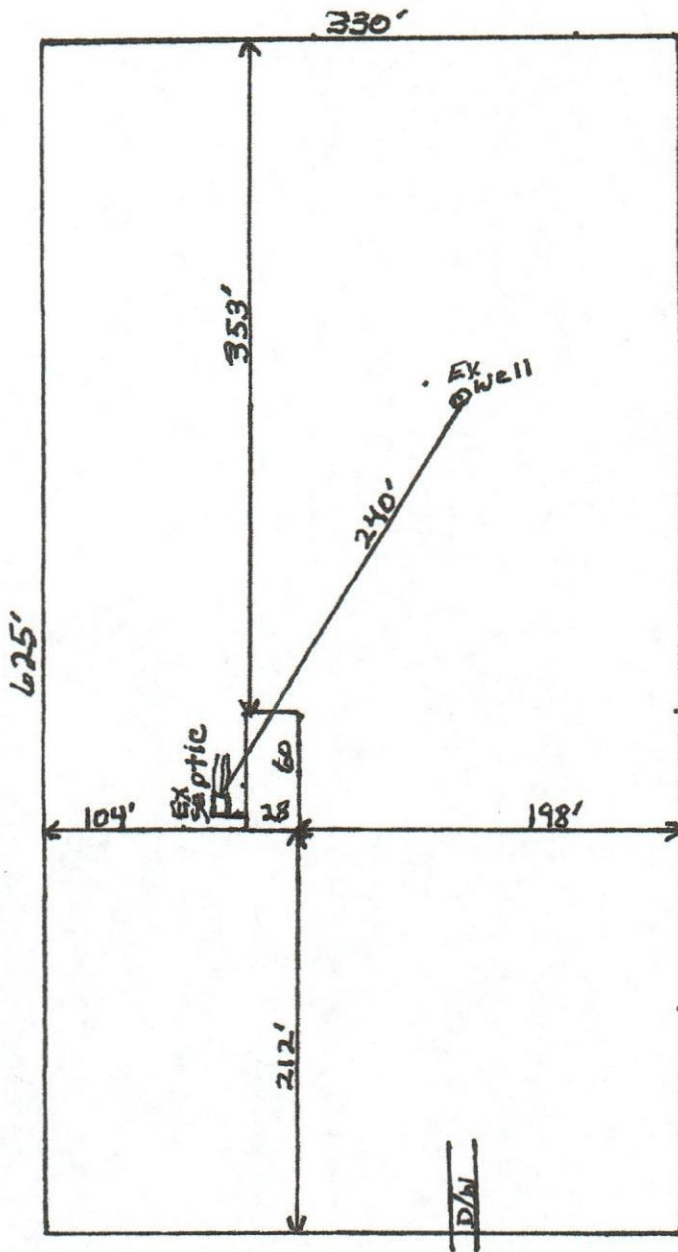
Site Plan submitted by: Scarp North

Plan Approved ☒ Not Approved ☐ Date 1/20/22

By [Signature] [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

1" = 100' \nwarrow 21-1061



909 SW Norris Ave

Houston

Survey North