



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

FW

PERMIT NO. 22-0433  
DATE PAID: 5/13/22  
FEE PAID: 310.06  
RECEIPT #: 1834831

APPLICATION FOR:

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

APPLICANT: Austin Mattox

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: NA BLOCK: NA SUB: NA PLATTED: \_\_\_\_\_

PROPERTY ID #: 13-6S-17-09660-007 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y / ☐ N ]

PROPERTY SIZE: 12.1 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ]<=2000GPD ☐ ]>2000GPD

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

PROPERTY ADDRESS: 3401 SE October Rd, Lake City, Fl 32025

DIRECTIONS TO PROPERTY: TL onto US-41S, TL onto FL-238E,  
TR onto SE October Rd, property 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
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1	SF Residential	3	1414.1	
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2

3

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: William A. Bishop II

DATE: 5/6/2022

DM 4015, 08/09 (Obsoletes previous editions which may not be used)  
Incorporated 64E-6.001, FAC

STATE OF FLORIDA  
DEPARTMENT OF HEALTH

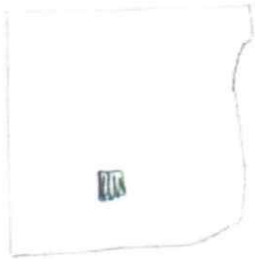
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 22-0433

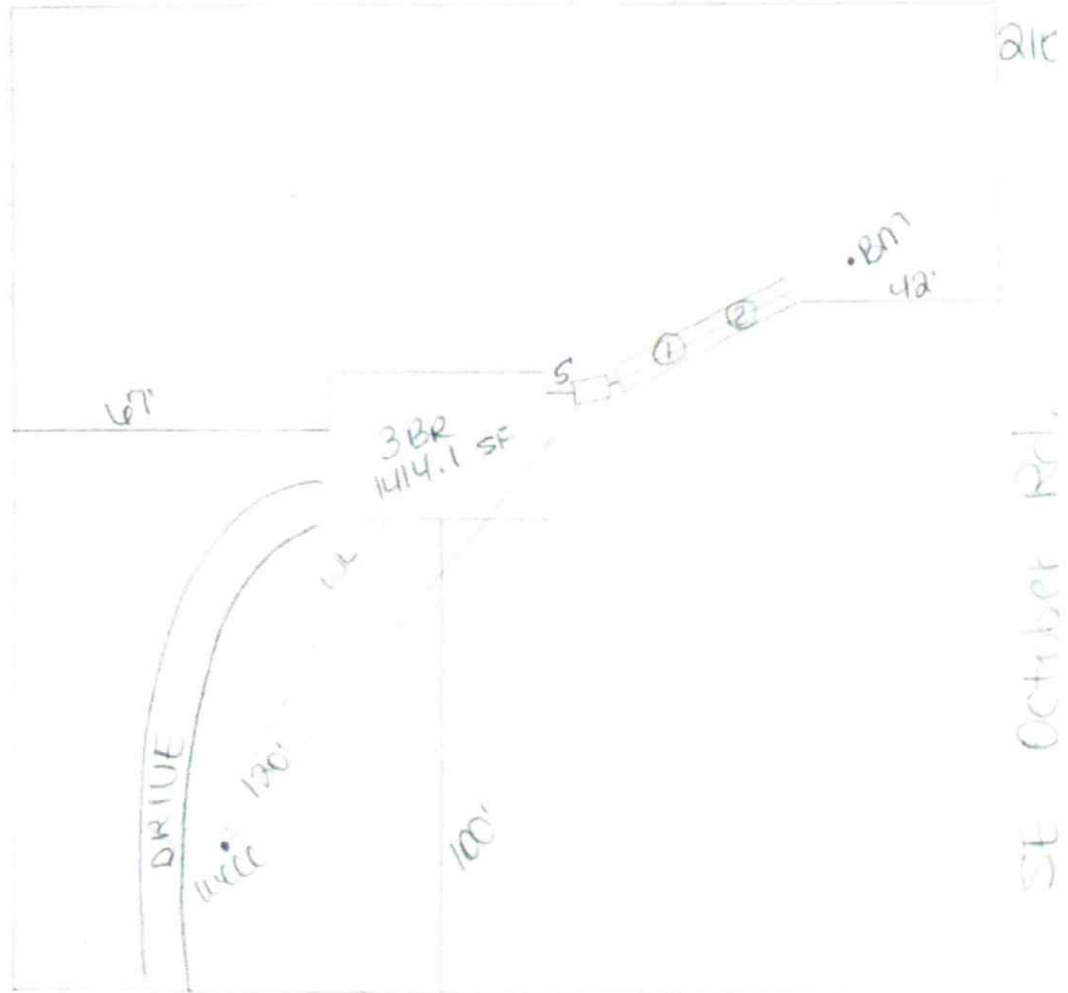
Mattox

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



1 acre of 12.1



Notes: SE October Rd.

1 acre of 12.1

Site Plan submitted by: William D. Bishop II

Plan Approved ☒ Not Approved

By [Signature]

**Columbia CHD**

MASTER CONTRACTOR

Date 5-6-22

County Health Department

5/24/22

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT