



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

PERMIT NO. 20-8443
DATE PAID: 4/23/20
FEE PAID: 200.00
RECEIPT #: 1511437

APPLICATION FOR:

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

APPLICANT: Gregg & Melissa Kulczykke

AGENT: Susan L. Frazee

TELEPHONE: (386) 292-6722

MAILING ADDRESS: 346 NW Ivy Glen, Lake City, FL 32055

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: 17 BLOCK: SUBDIVISION: River Rise PLATTED:

PROPERTY ID #: 16-75-17-10006-217 ZONING: I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 5.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

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

PROPERTY ADDRESS: 275 SW Grey Way, High Springs, FL 32643

DIRECTIONS TO PROPERTY:

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

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>in ground pool</u>	<u>—</u>	<u>—</u>	<u>ORIGINAL ATTACHED</u>
2	<u> </u>	<u> </u>	<u> </u>	<u> </u>
3	<u> </u>	<u> </u>	<u> </u>	<u> </u>
4	<u> </u>	<u> </u>	<u> </u>	<u> </u>

☐ Floor/Equipment Drains ☐ Other (Specify)

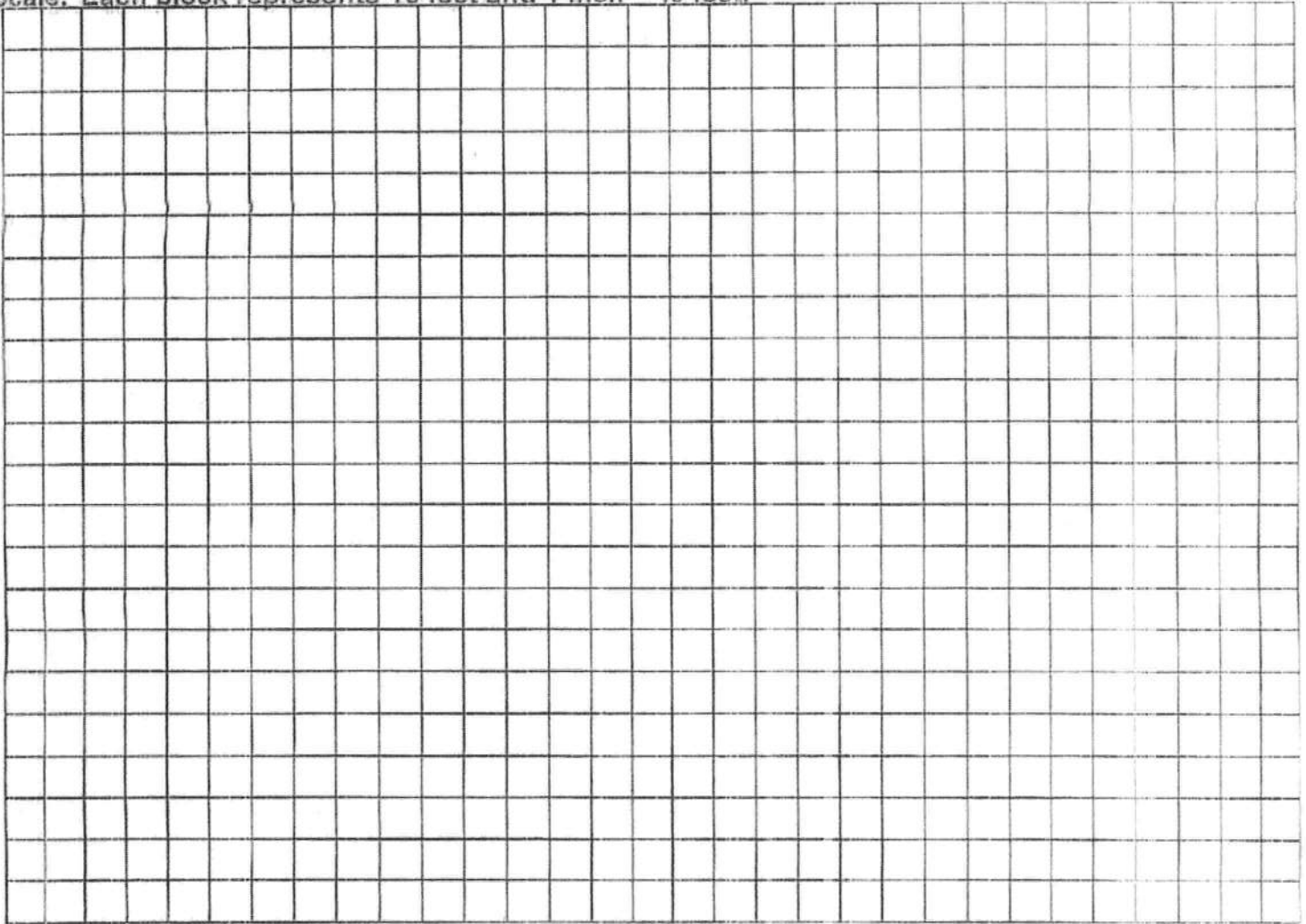
SIGNATURE: Susan L. Frazee DATE: 6/4/2020

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Permit Application Number 20-0493

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

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



Notes: see attached

Site Plan submitted by: Susan L. Fray 6/4/2020
Plan Approved [Signature] Not Approved [Signature] Date 6/26/20
By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

[illegible]

PROJECT ADDRESS
Lot #17 258 Gray Way
High Springs, FL

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JOB NUMBER

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CP • Model 77