



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

PERMIT NO. 14-0130
DATE PAID: 3/5/14
FEE PAID: 360.00
RECEIPT #: 438155

APPLICATION FOR:

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

APPLICANT: Brandon Kountz

AGENT: Jeff Hardee TELEPHONE: _____

MAILING ADDRESS: 6450 NW 72 LN Chiefland FL 32626

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: MA BLOCK: MA SUBDIVISION: MA PLATTED: _____

PROPERTY ID #: 22-7-16-04283-003 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 2.12 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FSP? ☒ YES ☐ NO DISTANCE TO SEWER: MA FT

PROPERTY ADDRESS: Sierra FL White

DIRECTIONS TO PROPERTY: 47 South x/L. rr 138 x/L Fry
T/R SW Clayton T/R Sierra ~ 250' to easement on rt side lot
Cor T/R onto 2nd hwy go across parents lot to side ~ 360'

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

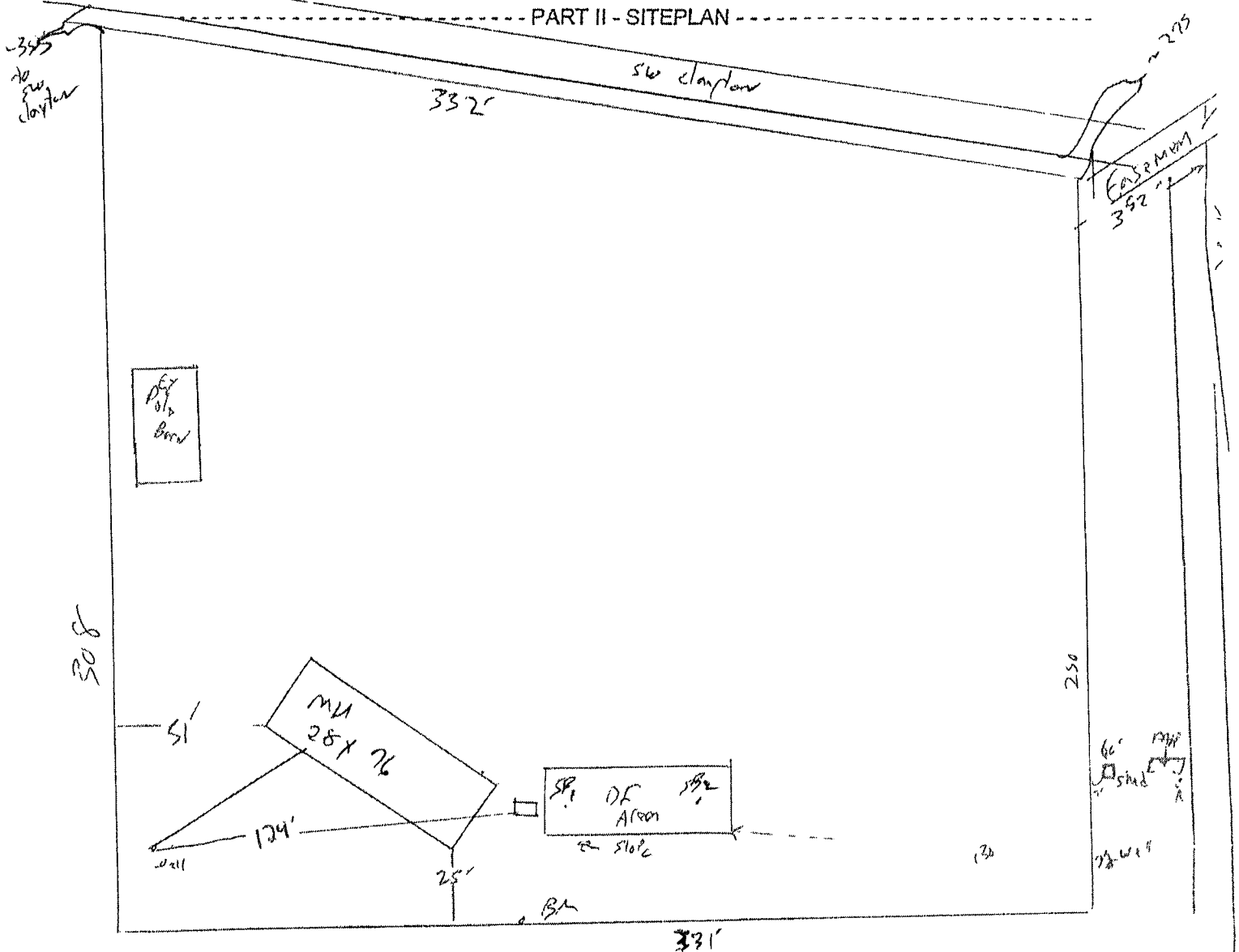
Unit	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>MH</u>	<u>4</u>	<u>2128</u>	<u>3</u>
2				
3				
4				
5				

Floor/Equipment Drains ☐ Other (Specify) _____

NATURE: J.H. Hardee DATE: 3-4-14

Permit Application Number _____

- PART II - SITEPLAN



Site Plan submitted by:

Plan Approved.

Not Approved

Date 3117114

By [Signature] Celina

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT