



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

PERMIT NO. 20-0646  
DATE PAID: 8/11/20  
FEE PAID: LED.00  
RECEIPT #: 1551154

APPLICATION FOR:

[ ] New System [ ☒ ] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ ] Like to like

APPLICANT: Peter Spradley

AGENT: HdL Customer Service, LLC TELEPHONE: (386) 984-9334

MAILING ADDRESS: 301 SW Faul Ct, Lake City, FL, 32024  
heidemorrison@gmail.com

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 #: 33-13-17-04628-002 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y/N ]

PROPERTY SIZE: 1 ACRES WATER SUPPLY: [ ☒ ] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y ☒ ] DISTANCE TO SEWER: 77' FT

PROPERTY ADDRESS: 314 NE Deep Creek Glen, Lake City, FL, 32055

DIRECTIONS TO PROPERTY: Turn (A) onto NE Madison St, Turn (B) onto N  
Manion Ave, Turn (C) onto NE Deep Creek Glen, the destination  
is on your (D)

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	<u>Old mobile home</u>	<u>3b, 2bath</u>	<u>1130 sq ft</u>	
2	<u>New mobile home</u>	<u>3b, 2bath</u>	<u>1456 sq ft</u>	
3				
4				

ORIGINAL ATTACHED

[ ] Floor/Equipment Drains [ ☒ ] Other (Specify) \_\_\_\_\_

SIGNATURE: Information DATE: 08/10/20



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

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

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

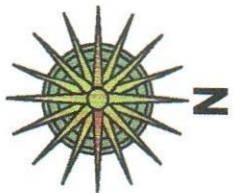
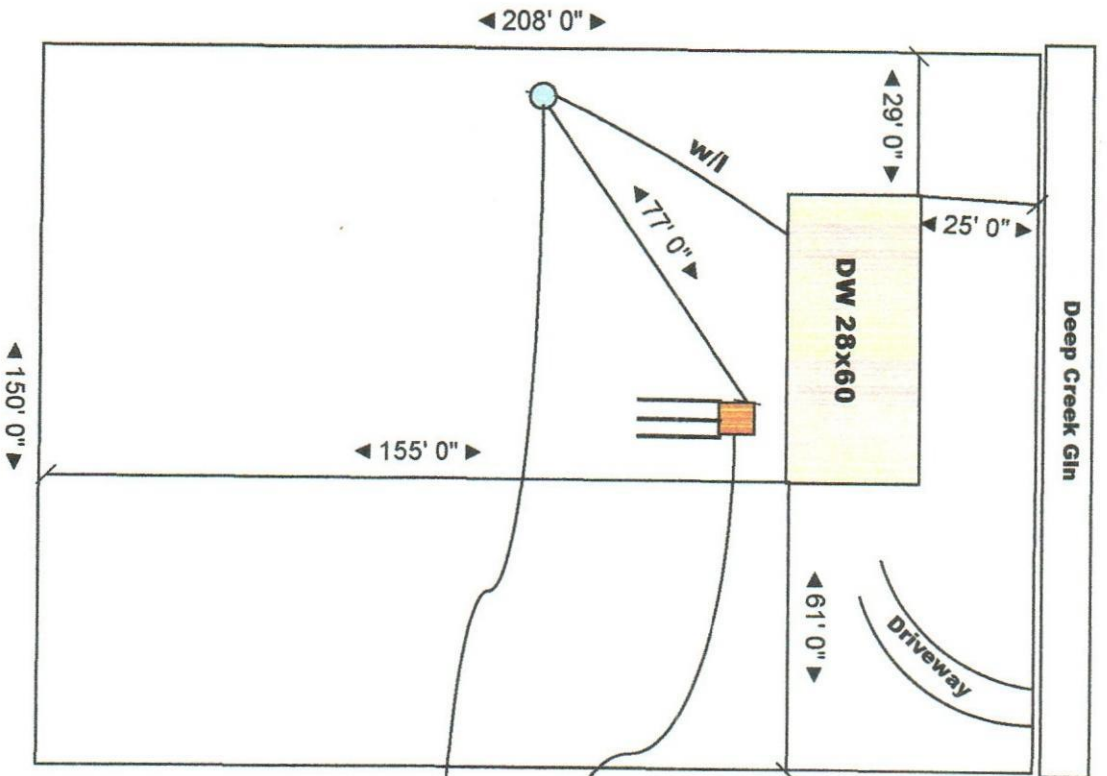
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\_\_\_\_\_

Site Plan submitted by: Rufanison Agent: ☒ Owner: \_\_\_\_\_ Date: 02/10/20  
Plan Approved ☒ Not Approved \_\_\_\_\_ Date 6/12/2020  
By Kell Re COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

20-0646



Parcel ID: 33-1S-17-04628-002

Existing Septic

Existing Well

<b>Site:</b>	<b>316 NE Deep Creek Gln, Lake City</b>	<b>Drawing:</b>	<b>801316</b>	<b>Project:</b>	<b>0000316</b>	<b>Drawn:</b>	<b>Heide M</b>	<b>Notes:</b>	<b>H&amp;L Customer Service, LLC</b>
<b>Title:</b>	<b>Peter Spradley</b>	<b>Scale:</b>	<b>1"=40'</b>	<b>Date:</b>	<b>08/10/20</b>	<b>Rev:</b>	<b>A</b>		<b>301 SW Faul Ct</b>
									<b>Lake City, FL, 32024</b>
									<b>(386) 984-9334</b>

Kyle Ray 8/12/2020