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

PERMIT NO. 22-0847
DATE PAID: 10/12/22
FEE PAID: 260.00
RECEIPT #: 1905335

APPLICATION FOR:
[ ] New System [X] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: Melvin and Marlene Towner

AGENT: Bryan Zecher Construction TELEPHONE: 386-752-8663

MAILING ADDRESS: 2370 SW SR 47, Lake City, FL 32025

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: 13 BLOCK: _____ SUBDIVISION: Southern Landings Aviation PLATTED: _____

PROPERTY ID #: 12-4S-16-02941-113 ZONING: Res I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: .8 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____FT

PROPERTY ADDRESS: 271 SW Plantation Ter, Lake City

DIRECTIONS TO PROPERTY: 90 W, turn left on Sister Welcome Rd, turn left onto SW Brothers Lane, turn Sw Plantation Terr, approx 900' on the right

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

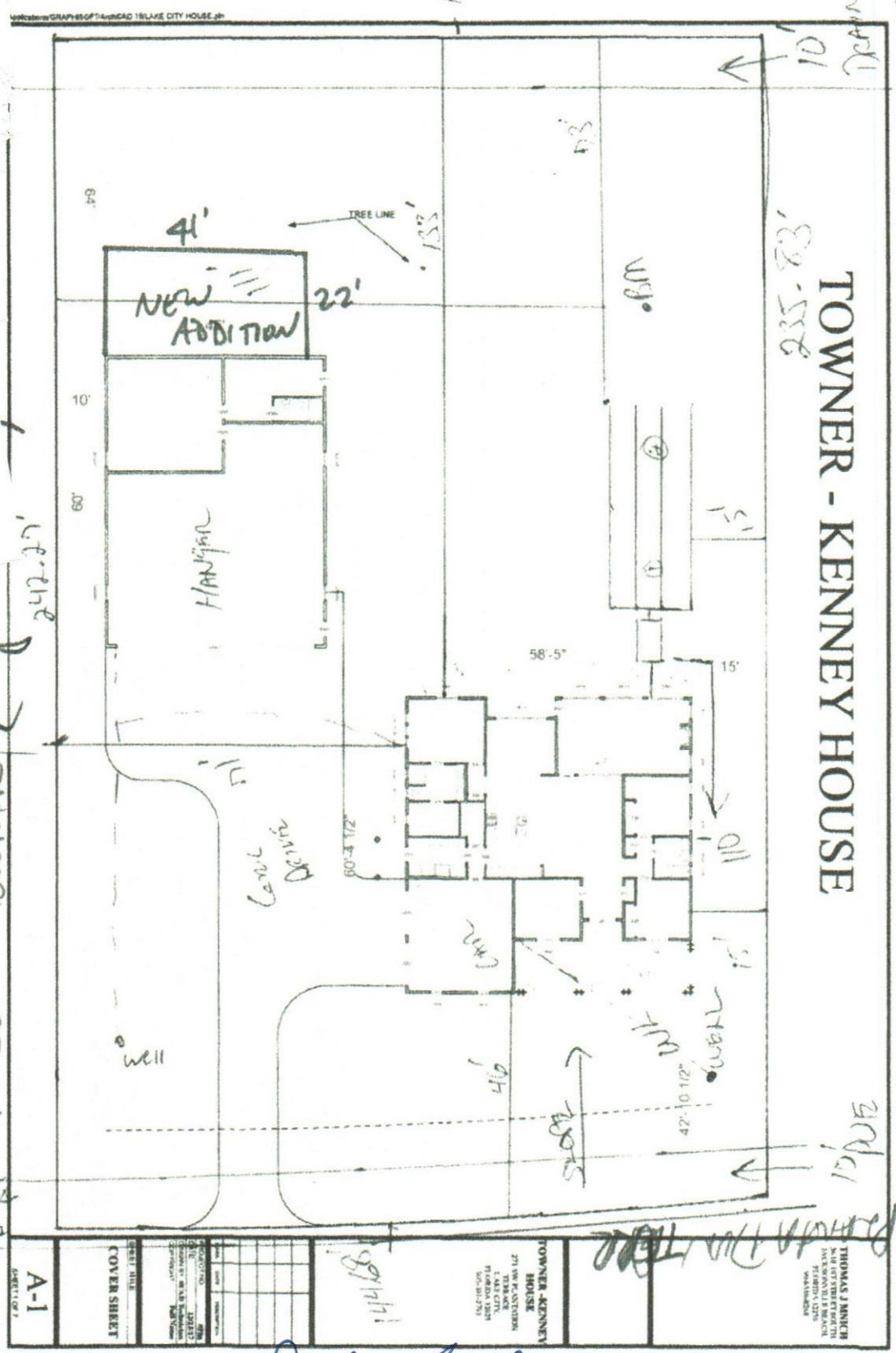
Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Single family dwelling	3	2521	ORIGINAL ATTACHED
2	Garage	—	990	
3				
4				

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

SIGNATURE: _____ DATE: 10/11/22

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

22-0847



APPROVED

Sallie Ford
Elf Director
Columbia

10.19.22

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PART II - SITEPLAN

[redacted] 40 feet. Dumpster

See Attached

Notes:

Site Plan submitted by: [signature] Agent: ✓ Owner: Date: 10/11/22

Plan Approved X Not Approved Date 10.19.22

By Sallie Ford EH Director Alachua County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC
(Stock Number: 5744-002-4015-6)