



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

PERMIT NO. 21-0235  
DATE PAID: 9-1-21  
FEE PAID: 100.00  
RECEIPT #: 1718050

APPLICATION FOR:

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

APPLICANT: Ronald and Judy Hetrick

AGENT: Tuff Shed/Mindy Higgins

TELEPHONE: (904) 612-6146

MAILING ADDRESS: 700 Blanding Blvd. #18, Orange Park, FL 32065

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: 7 BLOCK: 12 SUBDIVISION: Country Club Estates PLATTED: \_\_\_\_\_

PROPERTY ID #: 34-3S-17-07230-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y / ☐ N ]

PROPERTY SIZE: 0.227 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☒ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 221.0065, FS? ☐ Y / ☐ N ] DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 324 Golf Club Ave., Lake City, FL 32025

DIRECTIONS TO PROPERTY: Head W on NE Franklin St., to L on N Marion Ave., to L on SE Baya Dr., to R on S Golf Club Ave., house on the right

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	Existing House	3	1539	existing residence
2	Shed (proposed)	0	120	Residential storage shed (proposed)
3				Home built 1962
4				

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

SIGNATURE: Mindy Higgins

DATE: 8/31/2021





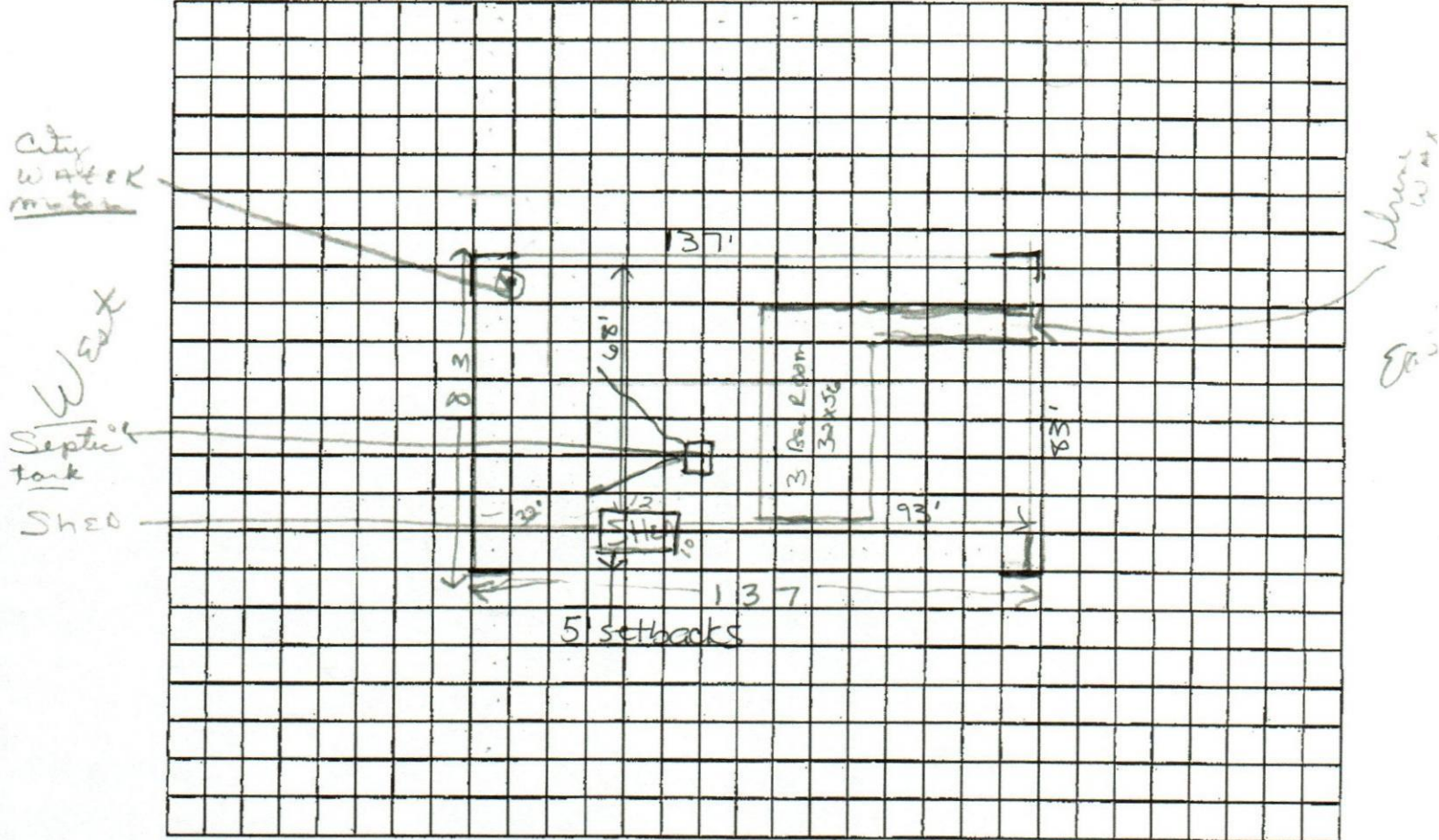
STATE OF FLORIDA  
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Permit Application Number

21-0735

PART II - SITEPLAN

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



Notes: Home owner  
drew up site plan

Site Plan submitted by: emilissors

Plan Approved ☒

Not Approved ☐

Date 9/10/21

By: [Signature]

Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

RECEIVED

NOV 19 1954

U.S. DEPARTMENT OF AGRICULTURE

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