



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

PERMIT NO. 20-0787
DATE PAID: 9/28/20
FEE PAID: 2,000.00
RECEIPT #: 1581178

APPLICATION FOR:

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

APPLICANT: Benjamin Benson

AGENT: _____ TELEPHONE: 561-379-7886

MAILING ADDRESS: PO Box 387 High Spring FL 32655

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: 15 BLOCK: - SUBDIVISION: Olene Estates PLATTED: 7-19-85

PROPERTY ID #: 11-08-17-09984-015 ZONING: AC I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 4.33 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS: 133 SE Marino Way, High Springs FL 32643

DIRECTIONS TO PROPERTY: South on 41 to Adams Rd to Marino Way
1st lot on West corner

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>Single Family Hm</u>	<u>1</u>	<u>672</u>	<u>ORIGINAL ATTACHED</u>
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Bj Bar DATE: 9/28/20

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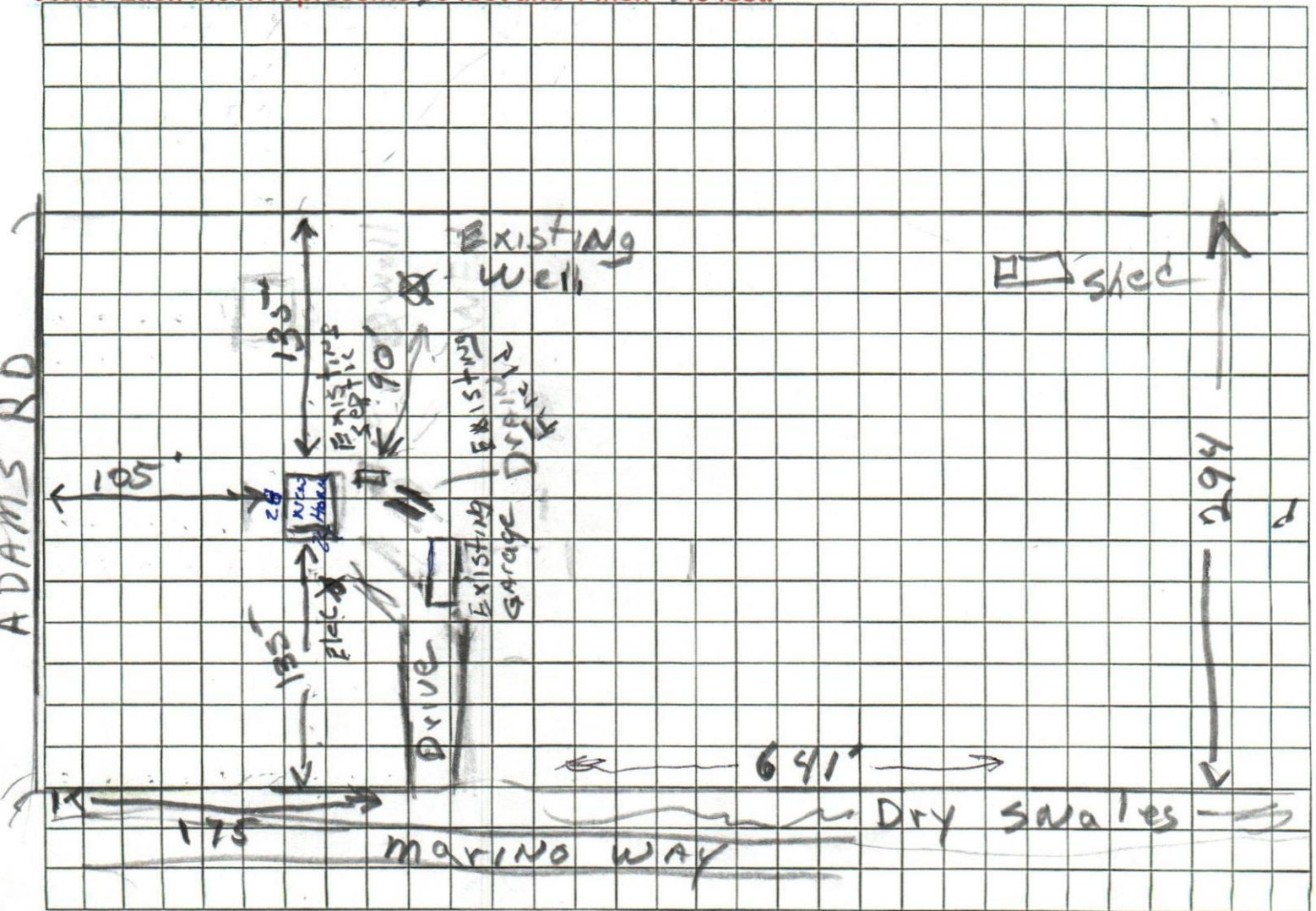
2. 10. 1966

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

Scale: Each block represents ²⁰10 feet and ⁸⁰1 inch = 40 feet.



Notes: BENJAMIN BENSON 133 SE MARINO WAY
24' x 28' single Fm Hm High Springs FL
11-07-17-0998-015

Site Plan submitted by: B. B. TITLE Owner DATE: 9-28-20

Plan Approved ☒ Not Approved ☐ Date 9/30/20

By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

