

SUNSHINE #:

DONE ON: 5/4

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

PERMIT NO. 13-0327  
DATE PAID: 7/11/12  
FEE PAID: 310.00  
RECEIPT #: 989498  
AP10 77520

## APPLICATION FOR:

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

APPLICANT: Mayo Fertilizer, Inc.AGENT: Ronald Ford - Ford's Septic Tank Service, LLC.TELEPHONE: (386) 755-6288 officeMAILING ADDRESS: 116 N.W. Lawtey Way Lake City, Florida 32055

(386) 755-6944 fax

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: 1 BLOCK: 1 SUBDIVISION: Meets 3 Bounds PLATTED: \_\_\_\_\_  
PROPERTY ID #: 36-35-17-07463-002 ZONING: Ag I/M OR EQUIVALENT: ☒ YAN 1  
PROPERTY SIZE: 24.10 ACRES WATER SUPPLY: ☐ PRIVATE ☒ PUBLIC 1 2000 GPD ☐ >2000 GPD  
IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y 1 DISTANCE TO SEWER: N/A FT  
PROPERTY ADDRESS: 413 NE McCloskey Ave Lake City, FL 32055  
DIRECTIONS TO PROPERTY: Hwy 90 East. (L) on McCloskey.  
property on (R)

## 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	OFFICE		4000 ft <sup>2</sup>	8 employees / 8 hr shift
2				$4000/100 = 40(15) = 6000 \text{ GPD}$
3				600 GPD
4				

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

SIGNATURE: ac Ford

- Ronald Ford

DATE: 7-11-2012

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

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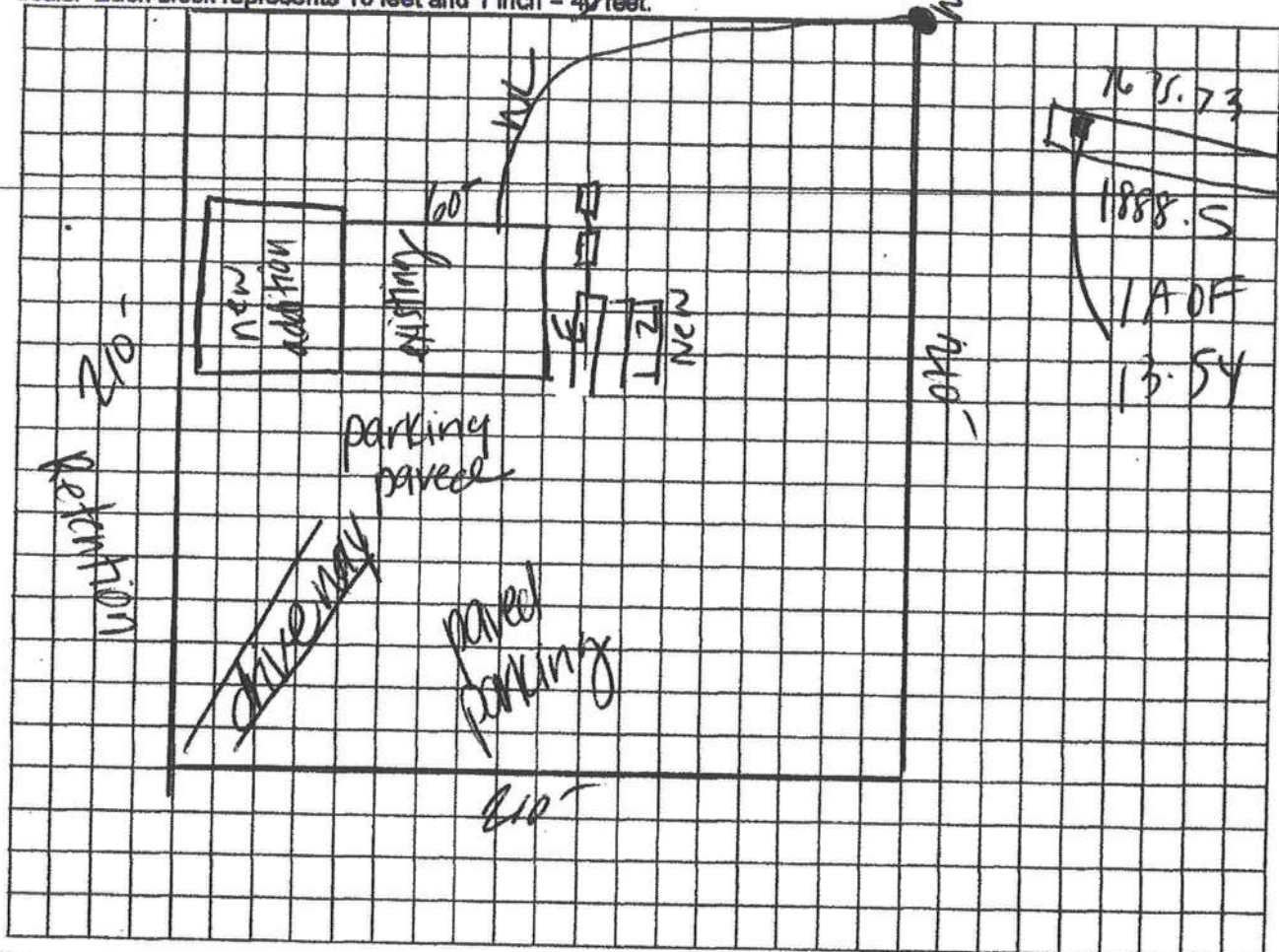
12-0527

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

## PART II - SITEPLAN

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



Notes:

Job Site Address:

parcel ID #:

County:

Site Plan submitted by: R.C. Ford

- Ronald Ford

master contractor

Plan Approved X

Not Approved \_\_\_\_\_

Date 7/13/12By [Signature][Signature]

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH-4015-88/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC  
(Stock Number: 5744-002-4015-8)

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