



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

PERMIT NO. 20-0583
DATE PAID: 7/22/20
FEE PAID: 310.00
RECEIPT #: 152527

APPLICATION FOR:

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

APPLICANT: Jami Harrell

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: NA BLOCK: NA SUB: NA PLATTED: _____

PROPERTY ID #: 14-2S-15-00066-004 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 8.18 ACRES WATER SUPPLY: [☒] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 1607 Tiger Drain Rd White Springs FL

DIRECTIONS TO PROPERTY: 41 North Left on Suwannee Valley Rd Right on White Springs Rd Left on NW Nova Rd Right on Tiger Drain Rd to address on 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	SF Residential	3	1248	
2				
3				

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

SIGNATURE: William D. Bishop II

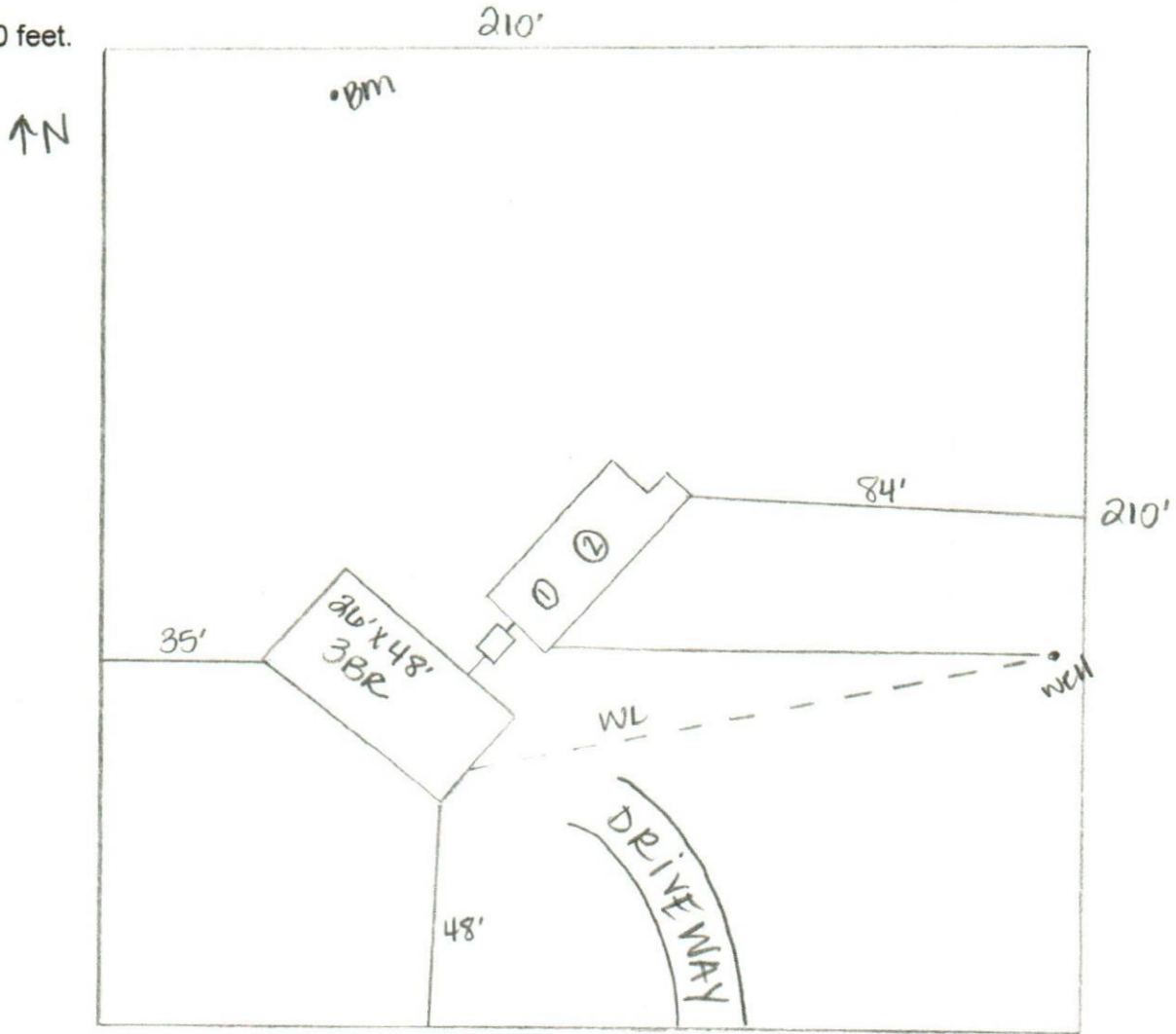
DATE: 7/21/2020

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

Permit Application Number 20-0583

J. Harrell (Jowers) PART II - SITEPLAN -----

Scale: 1 inch = 40 feet.



Notes: 1 ACRE OF 8.18

Site Plan submitted by: William D. Bishop II MASTER CONTRACTOR
Plan Approved X Not Approved _____ Date 7/21/2020
By [Signature] ESII. Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT