



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

22-0583

PERMIT NO. _____
DATE PAID: 6-29-22
FEE PAID: 60.00
RECEIPT #: _____

APPLICATION FOR:

[] New System [x] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary [] _____

APPLICANT: ALEX MATHE

AGENT: _____ TELEPHONE: 386-292-9994

MAILING ADDRESS: P.O. Box 7370 LAKE CITY, FL

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: 2 BLOCK: N/A SUBDIVISION: Cypress Lake Hills PLATTED: N/A

PROPERTY ID #: 34-45-15-00407-102 ZONING: RES I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 2.07 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 2344 SW CYPRESS LAKE Rd

DIRECTIONS TO PROPERTY: Highway 90 West, IL on County Road 247, R on
CYPRESS LAKE ROAD SECOND LOT LEFT PAST SW HORSEWAY

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	<u>HOUSE</u>	<u>2</u>	<u>1200</u>	<u>Ex</u>
2	<u>POOL</u>	<u>2</u>	<u>525 sq ft</u>	<u>30' 0" Long 15' 0" Wide</u>
3				
4				

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

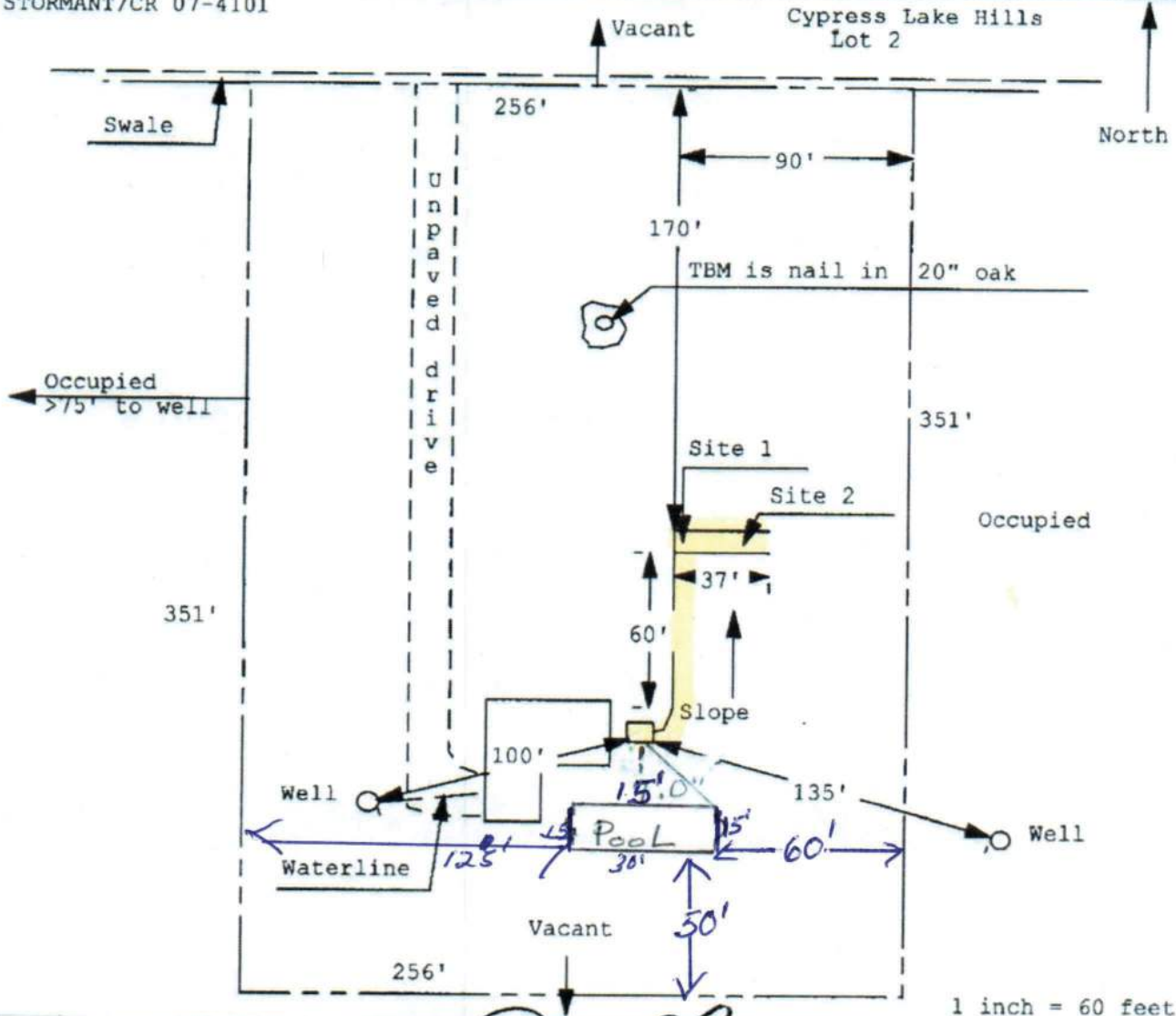
SIGNATURE: Alex Mathe DATE: 6-6-2022

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PART II - SITEPLAN

STORMANT/CR 07-4101



Notes:

The Pool is more than 7' FT From the Septic TANK.

Site Plan submitted by: Aly Mathe Agent: _____ Owner: ☒ Date: _____
Plan Approved ☒ Not Approved _____ Date 6-6-2022
By [Signature] COLUMBIA County Health Department 7/5/22

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT