

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

\$2279

For Office Use Only (Revised 7-1-15) Zoning Official MA Building Official MA

AP# 1906-62 Date Received 6/17/19 By MA Permit # 38263

Flood Zone X Development Permit _____ Zoning A-3 Land Use Plan Map Category A8

Comments Elevation letter rec'd with MFE at 12" above the adjacent ground elevation at the building site, with grading to convey all storm water runoff away from

FEMA Map# _____ Elevation _____ Finished Floor 12' above flood River _____ In Floodway _____

☐ Recorded Deed or ☒ Property Appraiser PO ☒ Site Plan ☒ EH # 19-0483 ☐ Well letter OR

☒ Existing well ☐ Land Owner Affidavit ☒ Installer Authorization ☐ FW Comp. letter ☒ App Fee Paid

☐ DOT Approval ☐ Parent Parcel # _____ ☒ STUP-MH 1906-36 ☒ 911 App

☐ Ellisville Water Sys ☒ Assessment paid on property ☐ Out County ☐ In County ☒ Sub VF Form

Notes - 5yr Temp use for Brother, 2nd unit on property.

Property ID # 36-3S-15-00302-102 Subdivision Duffe S/D Unrec Lot# B

▪ New Mobile Home X Used Mobile Home _____ MH Size 32 x 76 Year 2019

▪ Applicant Dale Burd Phone # 386-365-7674

▪ Address 20619 County Road 137, Lake City, FL, 32024

▪ Name of Property Owner William Guy Phone# 970-261-8578

▪ 911 Address 1210 SW Mayo Rd Lake City FL 32024

▪ Circle the correct power company - FL Power & Light - (Clay Electric)
(Circle One) - Suwannee Valley Electric - Duke Energy

▪ Name of Owner of Mobile Home Richard Guy Phone # 970-261-8578

Address 1212 SW Mayo Road, Lake City, FL, 32024

▪ Relationship to Property Owner Brother

▪ Current Number of Dwellings on Property 1

▪ Lot Size 397 x 1254 Total Acreage 11.17

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home No

▪ Driving Directions to the Property US 90 West, TL Mayo Road, 1.1 Miles on left (same as address 1212) follow to site on right

▪ Name of Licensed Dealer/Installer Robert Sheppard Phone # 386-623-2203

▪ Installers Address 6355 SE CR 245, Lake City, FL, 32025

▪ License Number IH-1025386 Installation Decal # 61838

*existing
35569-MH*

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Robert Shepard License # TH1025386

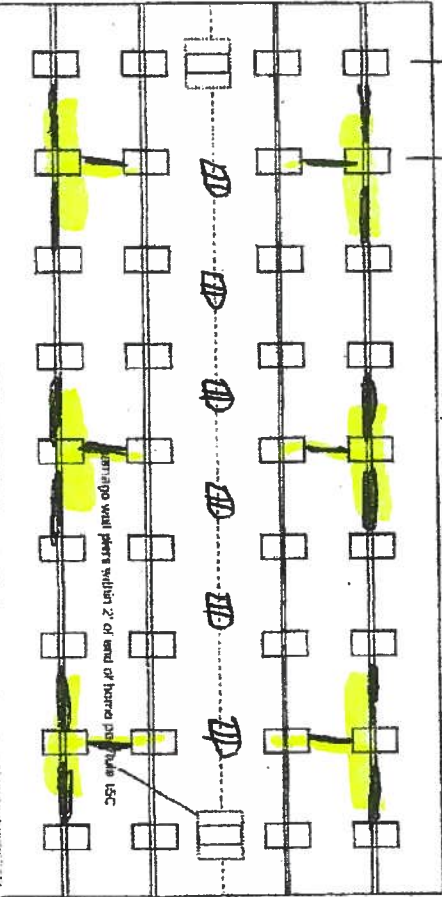
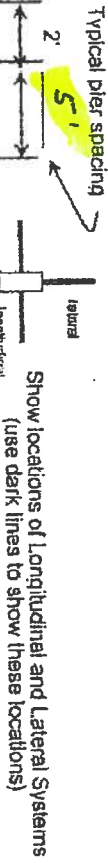
911 Address where home is being installed: SW MHO Road

Manufacturer ARC Dat Length x width 76 x 32

NOTE: If home is a single wide fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in

Installer's initials RS



New Home ☒ Used Home ☐

Home installed to the Manufacturer's Installation Manual ☒

Home is installed in accordance with Rule 15-C ☐

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 6838

Triple/Quad ☐ Serial # 10H6A01933633AB

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq ft)	Footer size (256)	18" x 18" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 28" (576)
1000 psf	3'	4'	5'	6'	7'	8'
1500 psf	4'	5'	6'	7'	8'	8'
2000 psf	5'	6'	7'	8'	8'	8'
2500 psf	6'	7'	8'	8'	8'	8'
3000 psf	7'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17x25

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.) 17x25

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below

Opening _____ Pier pad size _____

POPULAR PAD SIZES

Pad Size	Sq ft
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft ☒ 5 ft ☐

FRAME TIES

within 2' of end of home spaced at 5' 4" oc ☒

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms _____

Manufacturer Oliver 1101 ☒

OTHER TIES

Sidewall _____ Number 6

Longitudinal _____

Marriage wall _____

Shearwall _____

COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil ☒ without testing.

X _____ X _____ X _____

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X _____ X _____ X _____

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5 anchors without testing. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Shepard

Date Tested

6/7/19

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 25

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 28

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 28

Site Preparation

Debris and organic material removed ☒ Pad ☒ Other _____

Water drainage: Natural _____ Swale _____

Fastening multi-wide units

Floor: Type Fastener: 1995 Length: 5" Spacing: 16"
Walls: Type Fastener: 6x65 Length: 4" Spacing: 16"
Roof: Type Fastener: 1995 Length: 6" Spacing: 16"
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline

Gasket (Weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

RS

Type gasket

Foam

Installed:

Between Floors Yes ☒
Between Walls Yes ☒
Bottom of ridgebeam Yes ☒

Weatherproofing

The bottomboard will be repaired and/or laped. Yes ☒ Pg. 28
Siding on units is installed to manufacturer's specifications. Yes ☒
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ☒

Miscellaneous

Skirting to be installed. Yes ☒ No ☒
Dryer vent installed outside of skirting. Yes ☒ N/A ☒
Range downflow vent installed outside of skirting. Yes ☒ N/A ☒
Drain lines supported at 4 foot intervals. Yes ☒
Electrical crossovers protected. Yes ☒
Other: _____

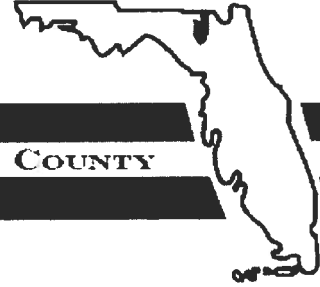
Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Robert Shepard

Date 6/7/19

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued: **6/17/2019 2:55:19 PM**

Address: **1210 SW MAYO Rd**

City: **LAKE CITY**

State: **FL**

Zip Code **32024**

Parcel ID **00302-102**

REMARKS: Address for proposed structure on parcel. 2nd address for this parcel.

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

Legend

Parcels

2018 Aerials



Water Lines

Others

CANAL / DITCH

CREEK

STREAM / RIVER

Addresses

2018 Flood Zones

0.2 PCT ANNUAL CHANCE

A

AE

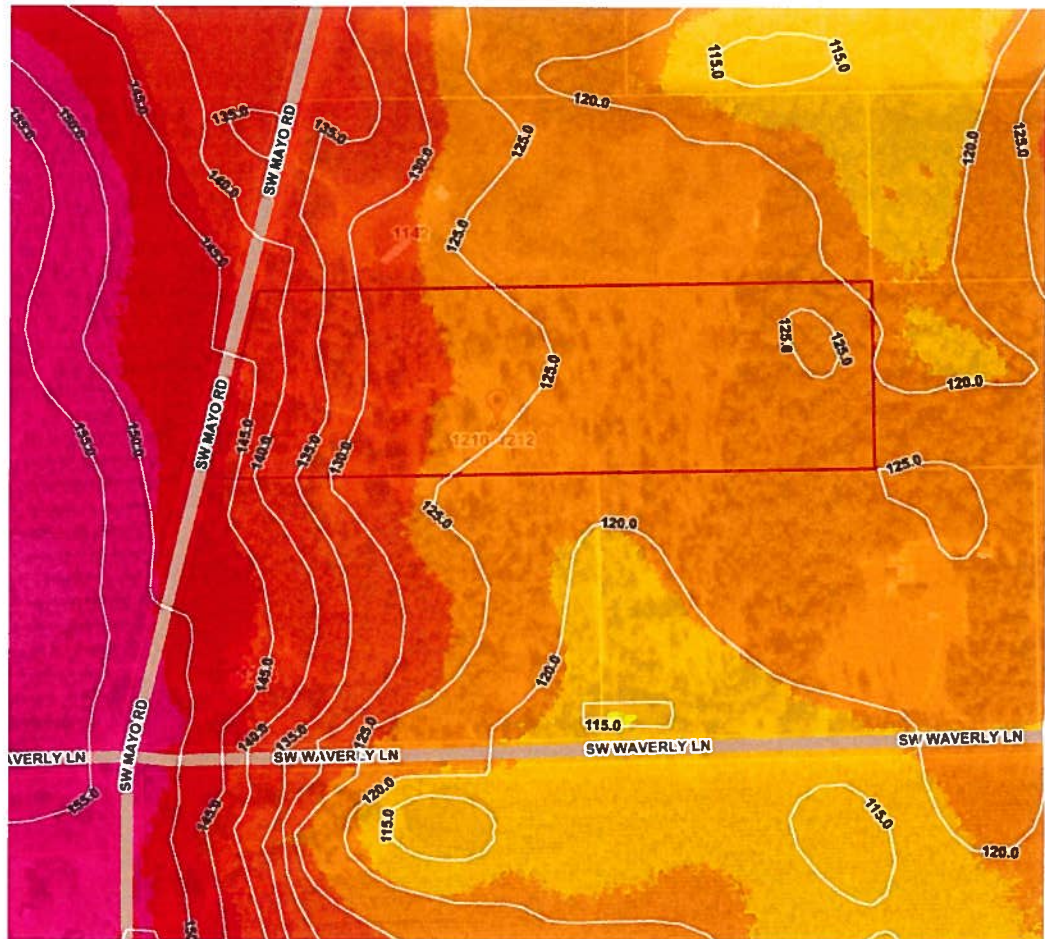
AH

Lidar Elevations



Columbia County, FLA - Building & Zoning Property Map

Printed: Tue Jun 18 2019 10:55:33 GMT-0400 (Eastern Daylight Time)



Parcel Information

Parcel No: 36-3S-15-00302-102

Owner: GUY WILLIAM H & CHRISTINA D

Subdivision: DUFFE UNREC

Lot:

Acres: 11.04473

Deed Acres: 11.17 Ac

District: District 2 Rocky Ford

Future Land Uses: Agriculture - 3

Flood Zones:

Official Zoning Atlas: A-3

All data, information, and maps are provided "as is" without warranty or any representation of accuracy, timeliness of completeness. Columbia County, FL makes no warranties, express or implied, as to the use of the information obtained here. There are no implied warranties of merchantability or fitness for a particular purpose. The requester acknowledges and accepts all limitations, including the fact that the data, information, and maps are dynamic and in a constant state of maintenance, and update.

CAROL CHADWICK, P.E.

Civil Engineer

1208 S.W. Fairfax Glen

Lake City, FL 32025

307.680.1772

ccpewyo@gmail.com

www.carolchadwickpe.com

June 12, 2019

Larry Martin

Ironwood Mobile Homes

larryironwood@yahoo.com

re: ELEVATION CERTIFICATION – 1212 SW Mayo Road, Lake City, FL

As requested, I inspected the building site for the proposed construction at the above referenced site. The location of the home was staked. See Photo 1. The natural topography of the property slopes away from Mayo Road and the east property line towards the center of the property and then south towards SW Waverly Lane. Per the SRWMD Flood Report, no FEMA flood zones existing on the property.

The proposed building site is lower than the nearest adjacent road, SW Mayo Road. A benchmark is located in a tree on the site. See Photo 2. The assumed datum elevation of the benchmark is 100.00 feet. The proposed minimum finished floor elevation of the structure is 101.00 feet. The finished floor elevation will be a minimum of 12" above the adjacent ground elevation at the building site. The area around the proposed structure shall be graded to convey all storm water runoff away from and around the site.



Photo 1. Building site

I spoke to Carol 6-18-19, the elevation number is only assumed and not surveyed. The requirement is the minimum 12" above the adjacent ground elevation at the building site.

L. Hobbs

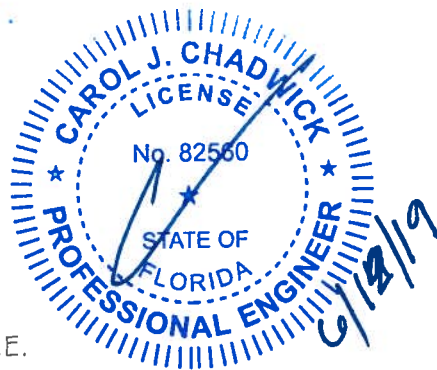


Photo 2. Tree with benchmark

I certify that the minimum finished floor elevation listed above will protect the structure against water damage from a base flood event, as defined in Article 8 of the Land Development Regulations.

Should you have any questions, please don't hesitate to contact me.

Respectfully,



Carol Chadwick, P.E.

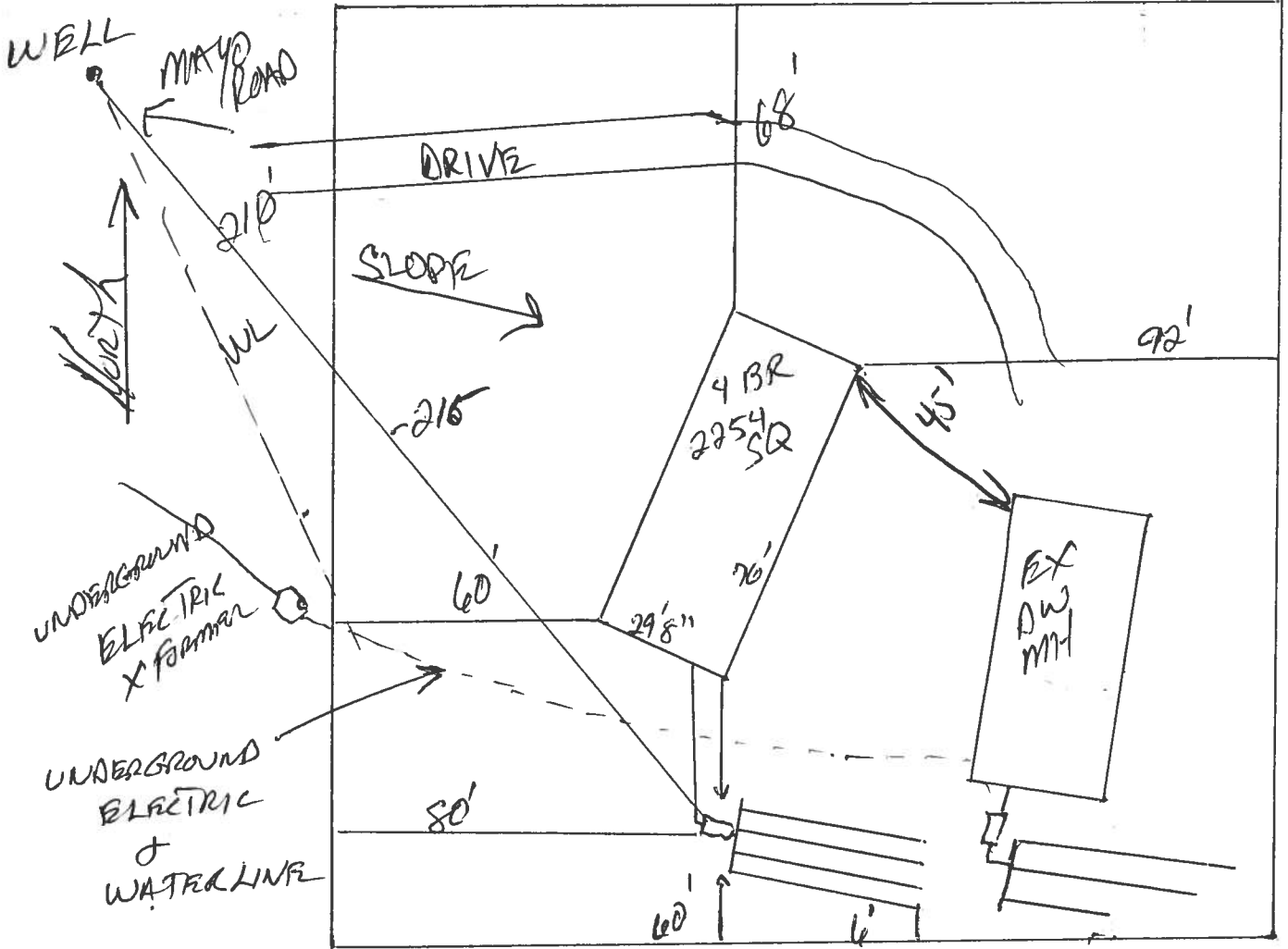
Cc: Brandon Stubbs, bstubbs@columbiacountyfla.com
Troy Crews, troy_crews@columbiacountyfla.com

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

Permit Application Number _____

----- *Guy* ----- **PART II - SITEPLAN** -----
210

Scale: 1 inch = 40 feet.



Notes: _____

1 Acce of 11.17

Site Plan submitted by: _____

CONTRACTOR

Plan Approved _____

Not Approved _____

Date _____

By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

$$1'' = 200'$$


Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

COMM NE COR OF S1/2 OF NE1/4, RUN W 1178.69 FT, S 390.82 FT FOR POB, CONT S 385 FT, W 1352.84 FT TO W
R/W OF SW MAYO RD, NE ALONG R/W 397.36 FT, E 125

2018 Certified Values

Mkt Lnd	\$43,115	Appraised	\$97,119
---------	----------	-----------	----------

Ag Lnd	\$0	Assessed	\$97,119
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Bldg	\$54,004	Exempt	\$0
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XFOB \$0 **county:\$97,119**

Just	\$97,119	Total	city:\$97,119
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	county:	\$97,119
Total	city:	\$97,119
Taxable	other:	\$97,119
	school:	\$97,119

NOTES:



Columbia County, FL

Parcel: **36-3S-15-00302-102****Owner & Property Info**

Result: 6 of 17

Owner	GUY WILLIAM H & CHRISTINA D 1212 SW MAYO RD LAKE CITY, FL 32024		
Site	1212 MAYO RD, LAKE CITY		
Description*	COMM NE COR OF S1/2 OF NE1/4, RUN W 1178.69 FT, S 390.82 FT FOR POB, CONT S 385 FT, W 1352.84 FT TO W R/W OF SW MAYO RD, NE ALONG R/W 397.36 FT, E 1254.49 FT TO POB. PARCEL "B" DUFFE' S/D UNREC. WD 1277-2604,		
Area	11.17 AC	S/T/R	36-3S-15
Use Code**	MOBILE HOM (000200)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2018 Certified Values		2019 Working Values	
Mkt Land (1)	\$39,865	Mkt Land (2)	\$43,115
Ag Land (0)	\$0	Ag Land (0)	\$0
Building (0)	\$0	Building (1)	\$54,004
XFOB (0)	\$0	XFOB (0)	\$0
Just	\$39,865	Just	\$97,119
Class	\$0	Class	\$0
Appraised	\$39,865	Appraised	\$97,119
SOH Cap [?]	\$0	SOH Cap [?]	\$0
Assessed	\$39,865	Assessed	\$97,119
Exempt	\$0	Exempt	\$0
Total Taxable	county:\$39,865 city:\$39,865 other:\$39,865 school:\$39,865	Total Taxable	county:\$97,119 city:\$97,119 other:\$97,119 school:\$97,119

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR Robert Sheppard PHONE 386-623-2203

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

Richard Guy

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

✓ ELECTRICAL 1074	Print Name <u>Glenn Whittington</u> Signature <u>[Signature]</u> License #: <u>EC 13002957</u> Phone #: <u>386-972-1700</u> Qualifier Form Attached <input checked="" type="checkbox"/>
✓ MECHANICAL/ A/C <u>11079</u>	Print Name <u>Ronald Bonds Sr.</u> Signature <u>[Signature]</u> License #: <u>CAC1817658</u> Phone #: <u>800-259-3470</u> Qualifier Form Attached <input checked="" type="checkbox"/>

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Glen Whittington (license holder name), licensed qualifier for Whittington Electric Inc (company name), do certify that the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>DAVID</u>	1. <u>[Signature]</u>
2. <u>Rocky Ford</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

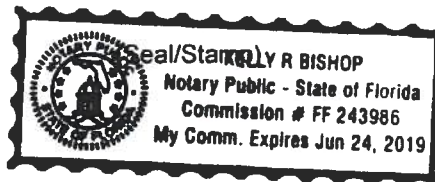
[Signature] License Qualifiers Signature (Notarized) EL13002957 License Number 3/7/16 Date

NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Glen Whittington, personally appeared before me and is known by me or has produced identification (type of I.D.) FL DL on this 7 day of MARCH, 20 16.

[Signature]
NOTARY'S SIGNATURE





COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Ronald E Bonds Sr (license holder name), licensed qualifier
for STYLE CREST ENTERPRISES, INC (company name), do certify that
the below referenced person(s) listed on this form is/are contracted/hired by me, the license
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said
person(s) is/are under my direct supervision and control and is/are authorized to purchase and
sign permits; call for inspections and sign subcontractor verification forms on my behalf

Printed Name of Person Authorized	Signature of Authorized Person
1. Dale Burr	1.
2. Rocky Ford	2.
3. Kelly Bishop	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or
officer(s), you must notify this department in writing of the changes and submit a new letter of
authorization form, which will supersede all previous lists. Failure to do so may allow
unauthorized persons to use your name and/or license number to obtain permits.

Licensed Qualifiers Signature (Notarized) CRC 1817658 2-16-14
License Number Date

NOTARY INFORMATION

STATE OF: FL COUNTY OF: Bay

The above license holder, whose name is Ronald Edward Bonds Sr
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 16th day of FEB 20 14

Stacey Ann Hopkins
NOTARY'S SIGNATURE

(Seal/Stamp)





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

PERMIT NO. 19-0483
DATE PAID: 6/14/19
FEE PAID: 310.88
RECEIPT #: 1479849

APPLICATION FOR:

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

APPLICANT: William Guy
AGENT: Robert W Ford JR NFST INC.

MAILING ADDRESS: 741 SE STATE Rd 100 LC FIA 32025
TELEPHONE: 386 755-6372

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: — BLOCK: — SUBDIVISION: —NA— PLATTED: 2007
PROPERTY ID #: 36-35-15-00202-102 ZONING: MH I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 11.7 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N
PROPERTY ADDRESS: 1212 SW Mayo Rd DISTANCE TO SEWER: — FT

DIRECTIONS TO PROPERTY: NE ON SE State Rd 100, (TL) onto E Dava
10.4 miles Turn Slight (L) onto SW Mayo Rd,
1212 on (L)

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 m/home 4 2254

2 _____

3 _____

4 _____

☐ Floor/Equipment Drains ☐ Other (Specify)

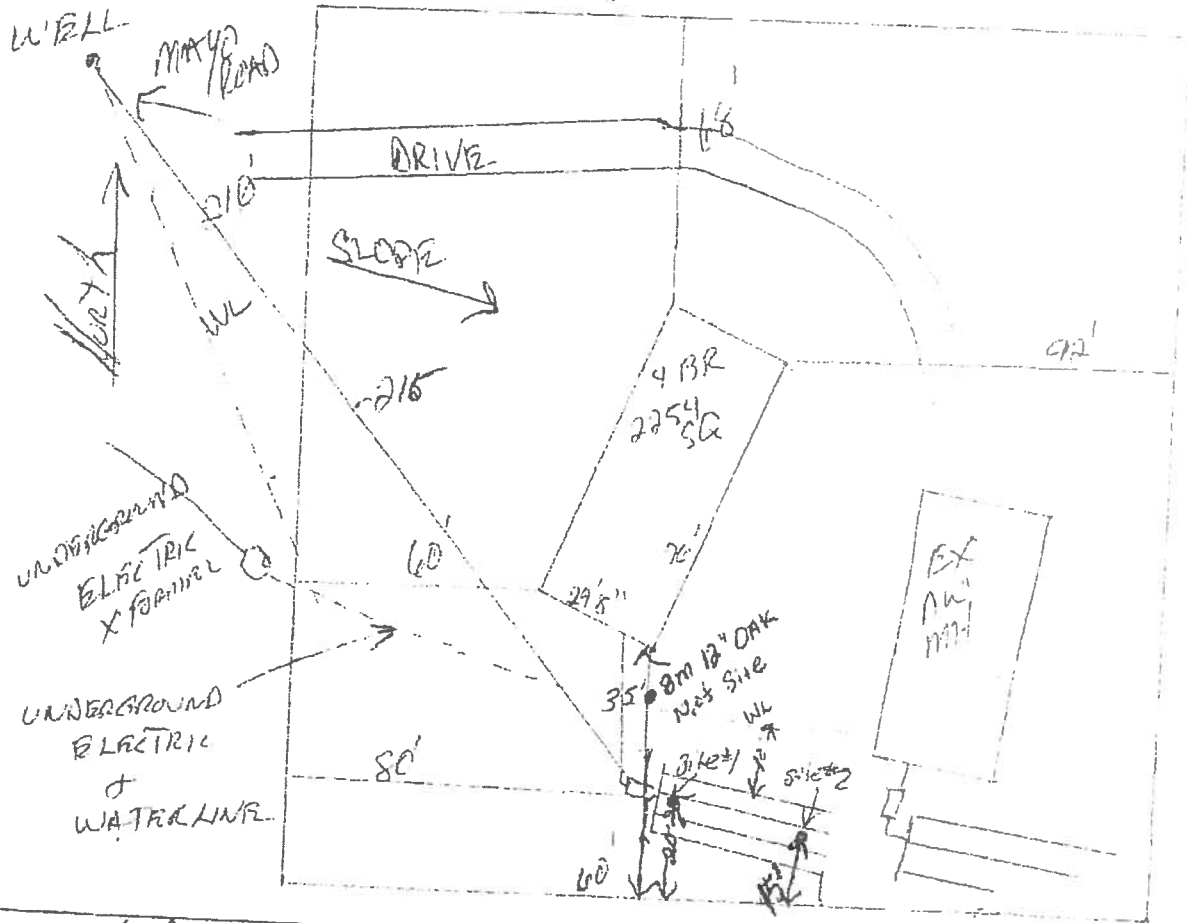
SIGNATURE: Robert W Ford JR DATE: 6/17/19
DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC

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

Permit Application Number 19-0483

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

Scale: 1 inch = 40 feet.



Notes:

1 Area of 11.17

Site Plan submitted by [Signature]

Plan Approved _____

By _____

Not Approved _____

CONTRACTOR

Date _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT