CR # 10-7571



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

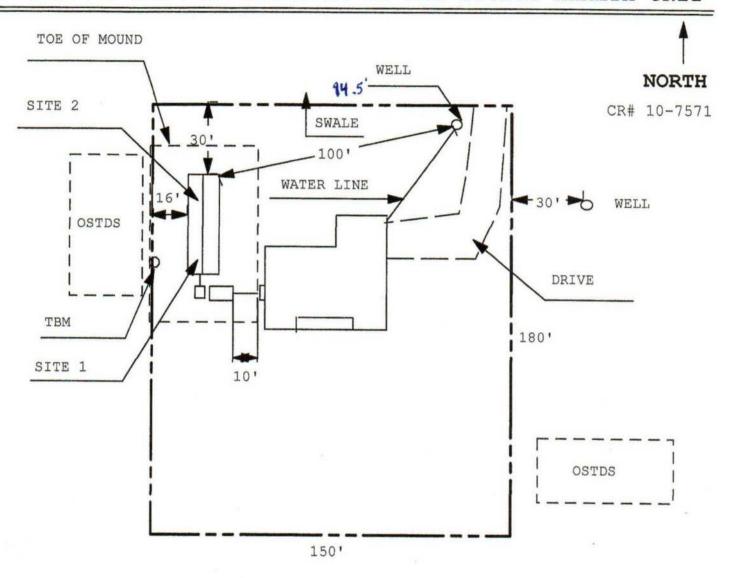
PERMIT NO.	20-0504
DATE PAID:	4/2/2/20
FEE PAID:	30.30
RECEIPT #:	1512 292

APPI.TCA	TION FOR CONSTRU	TOTTON DED	мтт	+	219717
APPLICATION FOR:					
[X] New System [[] Repair [Existing Syst Abandonment	tem []	Holding Tank	[] Inno	vative
C			Temporary		
APPLICANT: KARRIE CAR	TER				
AGENT: PELONI'S SEPTIC	•		TEL	EPHONE: (386)	755-1616
MAILING ADDRESS: 330 N	WRAILROAD ST.		LAKE CIT	Y FL	32055
TO BE COMPLETED BY APP BY A PERSON LICENSED I APPLICANT'S RESPONSIBI PLATTED (MM/DD/YY) IF	PURSUANT TO 489.105	(3) (m) OR 48 CUMENTATION	9.552, FLORIDA OF THE DATE THE	STATUTES.	IT IS THE
PROPERTY INFORMATION					
LOT:17 BLOCK:	A SUBDIVISION:	HOLLYBROO	K S/D	DT Amm	
	A DODDIVIDION.	HOLLI BROC	JK 3/D	PLATTI	sD:
PROPERTY ID #: 07-48-17	-08106-217	ZONING:	RES I/M OR	EQUIVALENT	: [NO]
PROPERTY SIZE: 0.620	ACRES WATER SUPPLY	Y: [X] PRIV	ATE PUBLIC []<=2000GPD	[]>2000GPD
IS SEWER AVAILABLE AS	PER 381.0065, FS?	[NO]	DISTAN	ICE TO SEWER	: N/A FT
PROPERTY ADDRESS: 204 E	BAMBI LN. LAKE CITY				
DIRECTIONS TO PROPERTY		BIOLIE 611 611		unit Market	
DIRECTIONS TO PROPERTY	SR 47 SOUTH TURN DEANNA TER. TO EI	ND TURN RIGH	MARVIN BURNET IT ON BAMBI LN SI	TE RD. TURN L TE ON LEFT.	EFT ON SW
BUILDING INFORMATION	[V] DECTDENMENT	[] CONT.		à.	
		[] COMME	RCIAL		
Unit Type of No. Establishment		Building C	ommercial/Instit	utional Syst	em Design
DS CADITSIMEIIC	Bearoons	Area Sqft T	able 1, Chapter	64E-6, FAC	
1 HOUSE	2	4 244			
2	3	1,314			
)				
3				NEGE	MEDI
4				JUN 2	11111
[] Floor/Equipment	Orains [] Other	(Specify)		By_ E	H U
SIGNATURE:	118/1	5	I	DATE: 4-1	3-2026
	W V			AND THE PROPERTY AND THE PARTY OF THE PARTY	

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

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number:

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



BIO	TATE T C	T-7 T 173 T 7 T 3 T	1001
INC	WELLIA	WITHIN	1 (111)

1 INCH = 40 FEET

Site	Plan Submitted	By Com Kley	Date	4/12/10	
?lan	Approved	Not Approved	Date 6/29/2020	11 /4	
3у	Kell hogo		Columbia	СРНИ	
lotes	·:				

* 70



Columbia County Health Department 217 NE Franklin St Lake City, FL 32055

PAYING ON:

12-SC-2094758 BILL DOC # 12-BID-4741619

CONSTRUCTION APPLICATION #: AP1512393

RECEIVED FROM:

CARRIE**20-0504 CARTER

AMOUNT PAID:

\$ 310.00

PAYMENT FORM:

CREDIT CARD 052757

PAYMENT DATE:

06/26/2020

MAIL TO: CARRIE**20-0504 CARTER

FACILITY NAME:	
I MOILITI I IN MILE.	

PROPERTY LOCATION:

204 BAMBI Ln Lake City, FL 32024

Lot: _____

ck. A

Property ID: __08106-217

EXPLANATION or DESCRIPTION:	QUANTITY	FEE
128 - OSTDS Construction System Inspection Research Fee	1	\$ 5.00
-1 - COUNTY FEE 1 (OSTDS)	1	\$ 25.00
-1 - OSTDS Construction Application and Plan Review, New	1	\$ 100.00
126 - OSTDS Construction Permit (New or Mod, Amendment)	1	\$ 55.00
127 - OSTDS Construction System Inspection	1	\$ 75.00
133 - OSTDS Construction Reinspection	1	\$ 50.00

RECEIVED BY:

MobleySJ

AUDIT CONTROL NO. 12-PID-4467520

Note: WATSON/20-0504