



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

CR # 10-7796

PERMIT NO. 20-0816
DATE PAID: 10/12/20
FEE PAID: 310.00
RECEIPT #: 1584249

APPLICATION FOR:

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

APPLICANT: PAMELA V. JACKSON

AGENT: ERKINGER BUILDING GROUP

TELEPHONE: (386) 754-5555

MAILING ADDRESS: 248 SE NASSAU ST.

LAKE CITY

FL 32025

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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED: _____

PROPERTY ID #: 08-7S-17-09944-003 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 1.010 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 1155 SW SCRUBTOWN RD. FT. WHITE.

DIRECTIONS TO PROPERTY: 441 SOUTH PAST I-75. TURN RIGHT ON CR 778. TURN RIGHT ON SCRUBTOWN RD. GO THRU CURVES. SITE 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	<u>HOUSE</u>	<u>3</u>	<u>1,724</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Matthew G. [Signature], Pres.

DATE: 10-12-2020

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Notes: _____