



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

PERMIT NO. 21-07604
DATE PAID: 9/14/21
FEE PAID: 100.00
RECEIPT #: 1730712

APPLICATION FOR:

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

APPLICANT: Best Development Group LLC

AGENT: CHUN PENG CHEN TELEPHONE: 386-755-5488

MAILING ADDRESS: 4938 Watervista Dr., Orlando, FL 32821

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: 15 BLOCK: _____ SUBDIVISION: Cool Breeze MHP PLATTED: _____

PROPERTY ID #: 18-4S-17-08447-000 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 8.5 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] $\leq 2000\text{GPD}$ [X] $> 2000\text{GPD}$

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

PROPERTY ADDRESS: 407 SW Susan Circle, Lake City, FL 32025

DIRECTIONS TO PROPERTY: _____

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>SWMH</u>	<u>2</u>	<u>816</u>	<u>Lot 15</u>
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: [Signature]

DATE: 9/14/21

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Permit Application Number

21-0744

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

Scale: Each block represents 10 feet and 1 inch = 40 feet.

Site plan grid area. The text "see attached" is handwritten in the center of the grid.

Notes:

Site Plan submitted by:

Agent:

Owner: ☒

Date: 9/14/2021

Plan Approved ☒

Not Approved ☐

Date: 9/16/21

By

COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT