



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

PERMIT NO. 21.0485  
DATE PAID: 5/21/21  
FEE PAID: 205.00  
RECEIPT #: 1245525

APPLICATION FOR:

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

APPLICANT: Mary Ann and Michael Sellers

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038

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: 1 BLOCK: D SUB: Southwood Acres PLATTED: \_\_\_\_\_

PROPERTY ID #: 36-4S-16-03364-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 2.74 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 277 SW Bellmont Drive, Lake City, FL 32024

DIRECTIONS TO PROPERTY: 47 South, TL on Benz Ave (just before Walter Avenue), the home is on the right at the corner of Benz Ave & Bellmont Dr.

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
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1	SF Residential	3	2830	<u>Built 1969</u> Total S&F 3792 - 7 460GPD
2	Addition	1	962	
3				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: William D. Bishop II

DATE: 5/13/2021

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

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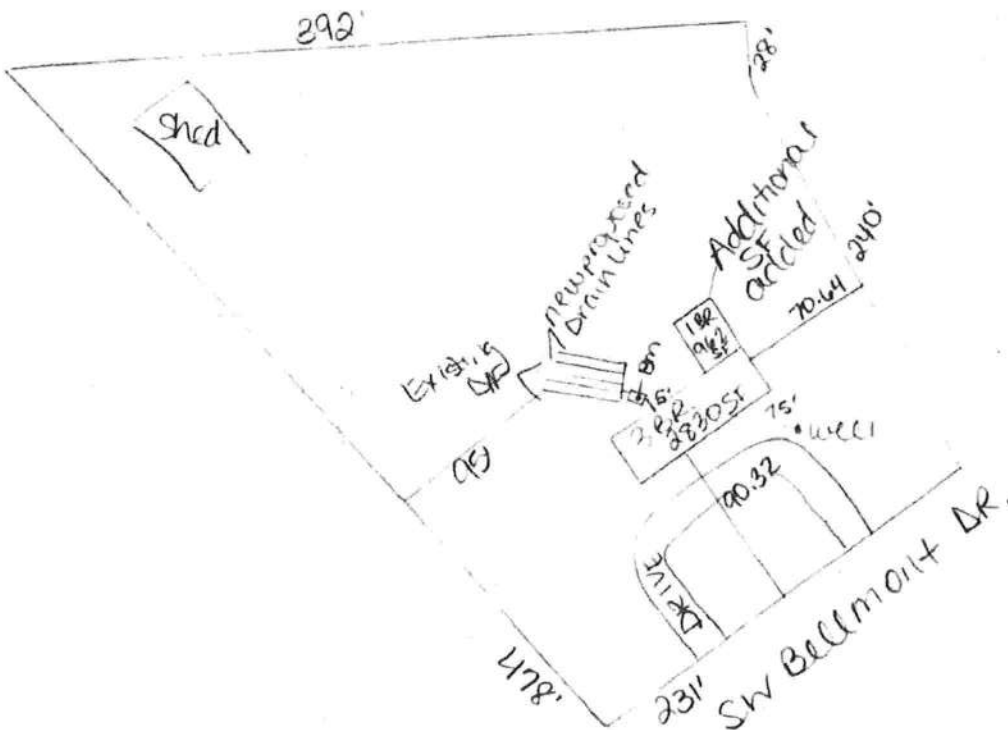
Permit Application Number 21-0485

Sellers

PART II - SITEPLAN

Scale: 1 inch = ~~40~~ 100 feet.

↑ N



Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Plan submitted by: William D. Bishop II  
Plan Approved ☒ Not Approved \_\_\_\_\_  
By [Signature] ES2 Columbia County Health Department  
MASTER CONTRACTOR  
Date 5-13-21

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT