THE REAL PROPERTY IN	6	2005)	STATE (DEPARTME	OF FLORID	A ALTH STEM CONSTRU Permit Applicatio			66)	
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Ł.	<u> </u>			PART II						
Scale:	Each bloc	k represents 5	feet and 1 incl	1.000						
Notes:	<u></u>		divt	RO	21	0'				
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Site Pl	an submi	tted by:	rlener	Inilin				own		
Plan Approved Not Approved					roved			Title Date 1/3/07		
By_ Oh Awerey			norrpp		Columbia		County Health Departmen			
XH 4015, 10	V96 (Replaces HF ber: 5744-002-401	RS-H Form 4015 which		E APPROVED	BY THE CO	UNTY HEALTH	63.00		Page 2 of 3	



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

- PART II - SITE PLAN - -

Scale: Each block represents 5 feet and 1 inch = 50 feet. 80' Existing MH 0 12N \sim 4 ()1 Notes: VO Nama gwn?c Title Site Plan submitted by Signature Date 1/3/02 Plan Approved 🛛 Not Approved Colum **County Health Departme** ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DH 4015, 10/96 (Replaces HRS-H Form 4015 which may be used) (Stock Number: 5744-002-4015-6) Page 2 of



http://appraiser.columbiacountyfla.com/Grizzly4_tmp/COLUMBIA10873112162776.jpg 6/15/2004