



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

PERMIT NO. 21-0096  
DATE PAID: 2/2/21  
FEE PAID: 310.00  
RECEIPT #: 1417414

APPLICATION FOR:

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

APPLICANT: Shawn Rogers

AGENT: Smith's Septic - Ray Smith TELEPHONE: 386-935-1429

MAILING ADDRESS: P.O. Box 838, Bell, FL 32619

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: 6 BLOCK:        SUBDIVISION: Three Rivers Unrec. PLATTED:       

PROPERTY ID #: 25-6S-15-00519-106 ZONING:        I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 10.13 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

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

PROPERTY ADDRESS: Illinois, Fort White

DIRECTIONS TO PROPERTY: 2nd Rt onto W Duval, Lt onto US-41, Rt  
Onto 800 SR 47, follow FL-47 to  
W Right of Way / SW Wilson Springs Rd, SW Newark Dr, to  
SW Illinois St.

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL SW Illinois St.

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>Building</u>	<u>1</u>	<u>1783</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)       

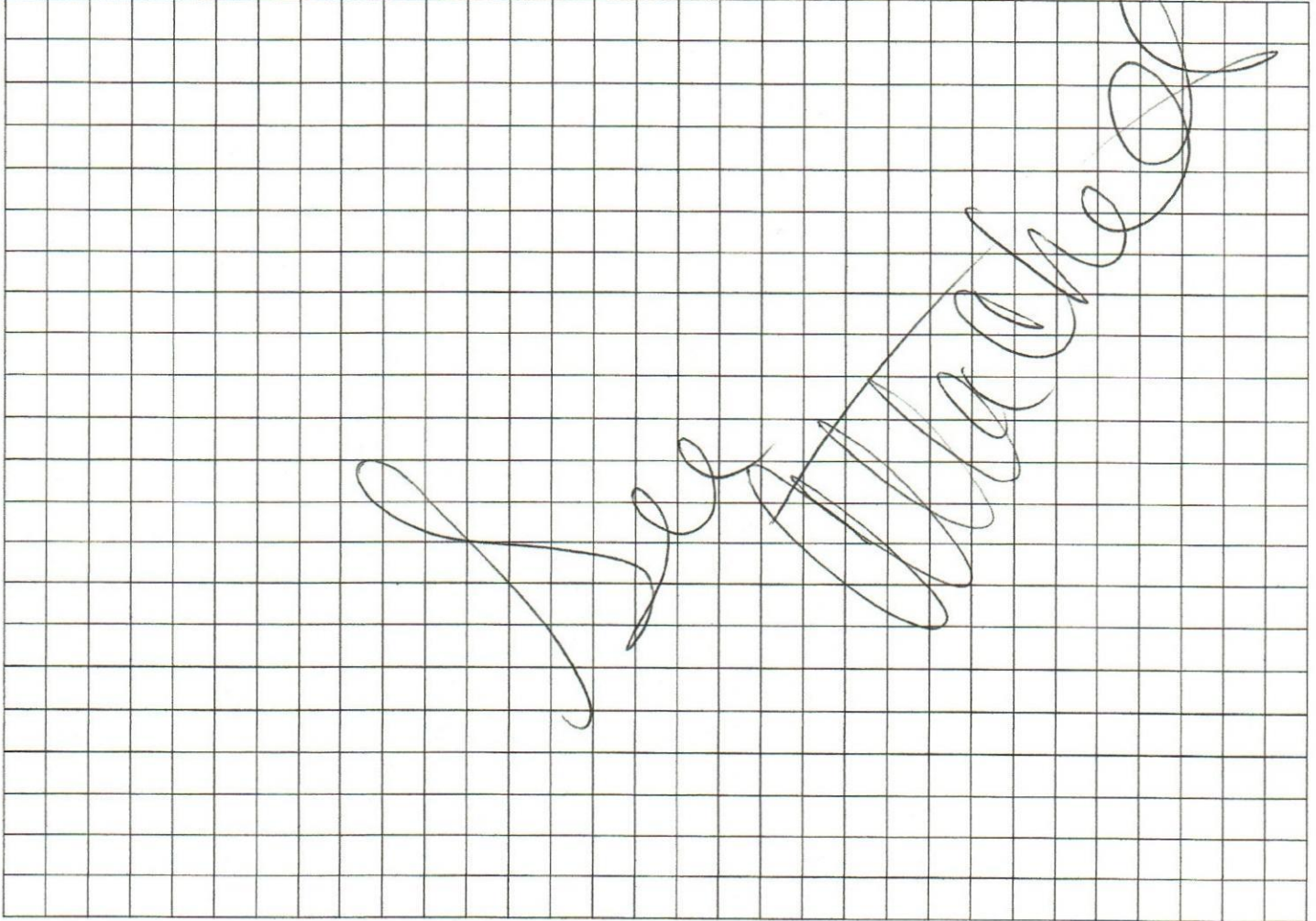
SIGNATURE: [Signature] DATE: 1-29-21

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-00926

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

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



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

Site Plan submitted by: [Signature]

Plan Approved [Signature] Not Approved \_\_\_\_\_

By Kell R Columbia

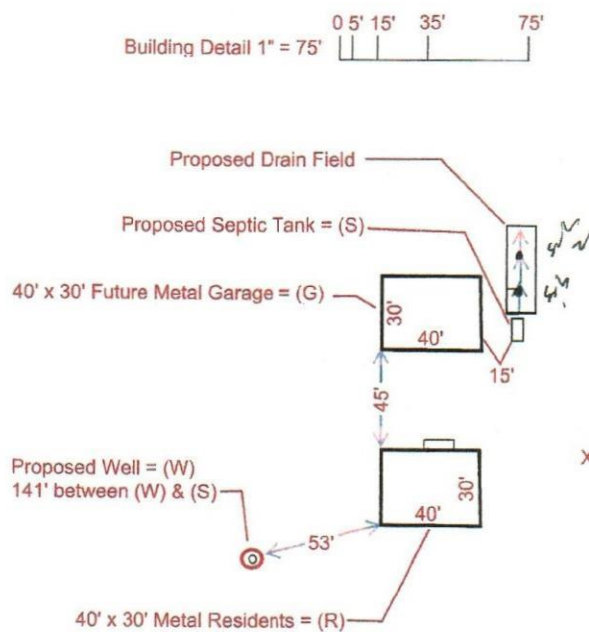
Date 4/3/2021

County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**




210094



Smith

XFMR<sub>W</sub> = Transformer on Wood Power Pole

---OHW--- = Overhead Wire

 = Wood Power Pole

Kenn  
2/3/2021

