

45916

SSO 061 205 986



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 22-0156
DATE PAID: 3/2/22
FEE PAID: 425.00
RECEIPT #: 1807069

APPLICATION FOR:

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

APPLICANT: John & Mary Young LLCAGENT: Howard Septic Tank Service Inc TELEPHONE: 386-935-1518MAILING ADDRESS: PO Box 100 Branford, FL 32008

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (a) 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: 17 BLOCK: — SUBDIVISION: Turkey Creek PLATTED: —PROPERTY ID #: 23-35-16-02279-117 ZONING: R I/M OR EQUIVALENT: ☐ Y ☐ NPROPERTY SIZE: .251 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☒ <2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 361.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: — FTPROPERTY ADDRESS: 199 NW Turkey Run Crt Lake CityDIRECTIONS TO PROPERTY: Attached

BUILDING INFORMATION

☒ RESIDENTIAL☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 42-6, FAS
1	<u>SFR</u>	<u>3</u>	<u>1685</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) Payment 3/2/22

SIGNATURE: John Young DATE: 2/03/22

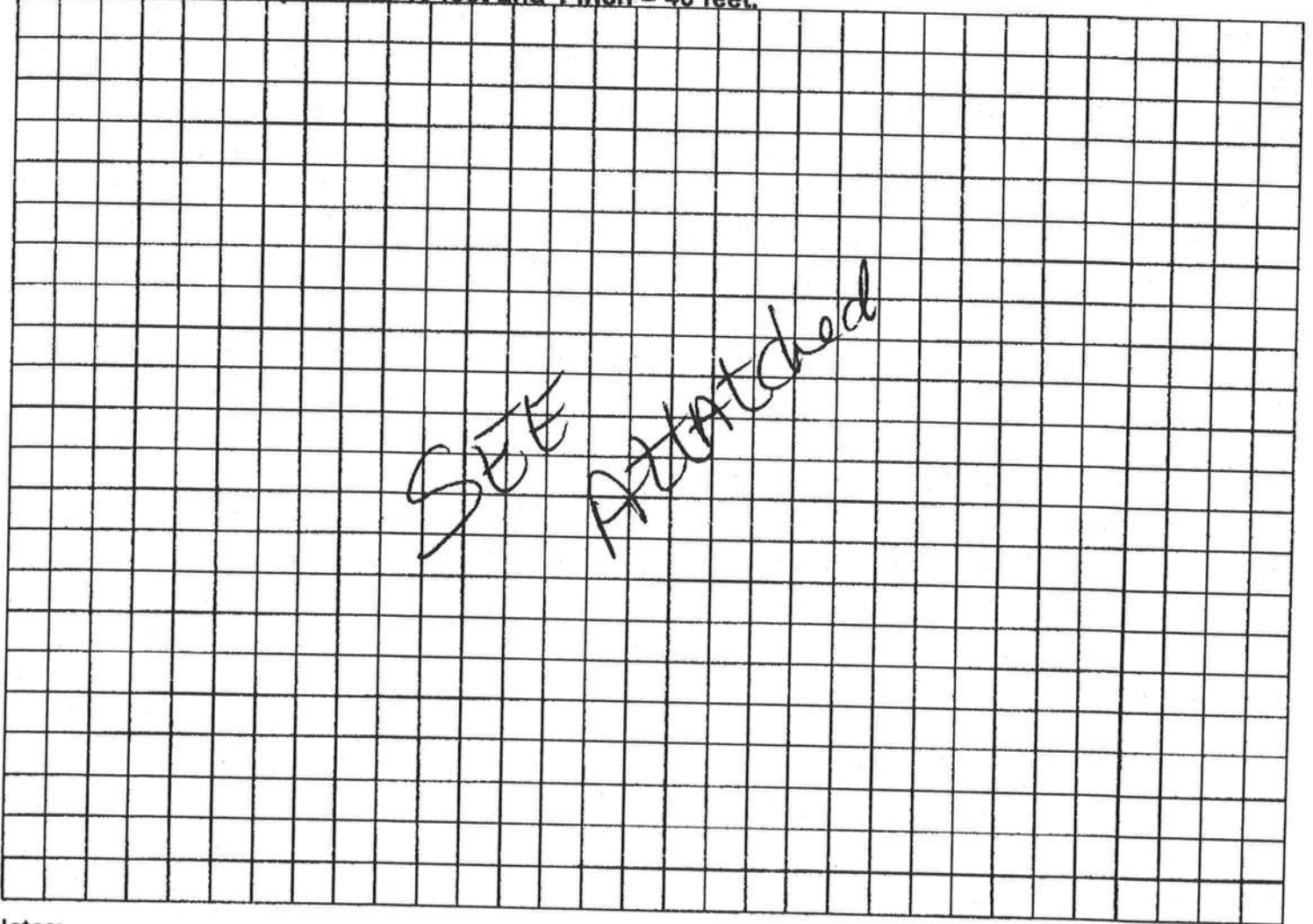
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-----PART II - SITEPLAN-----

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

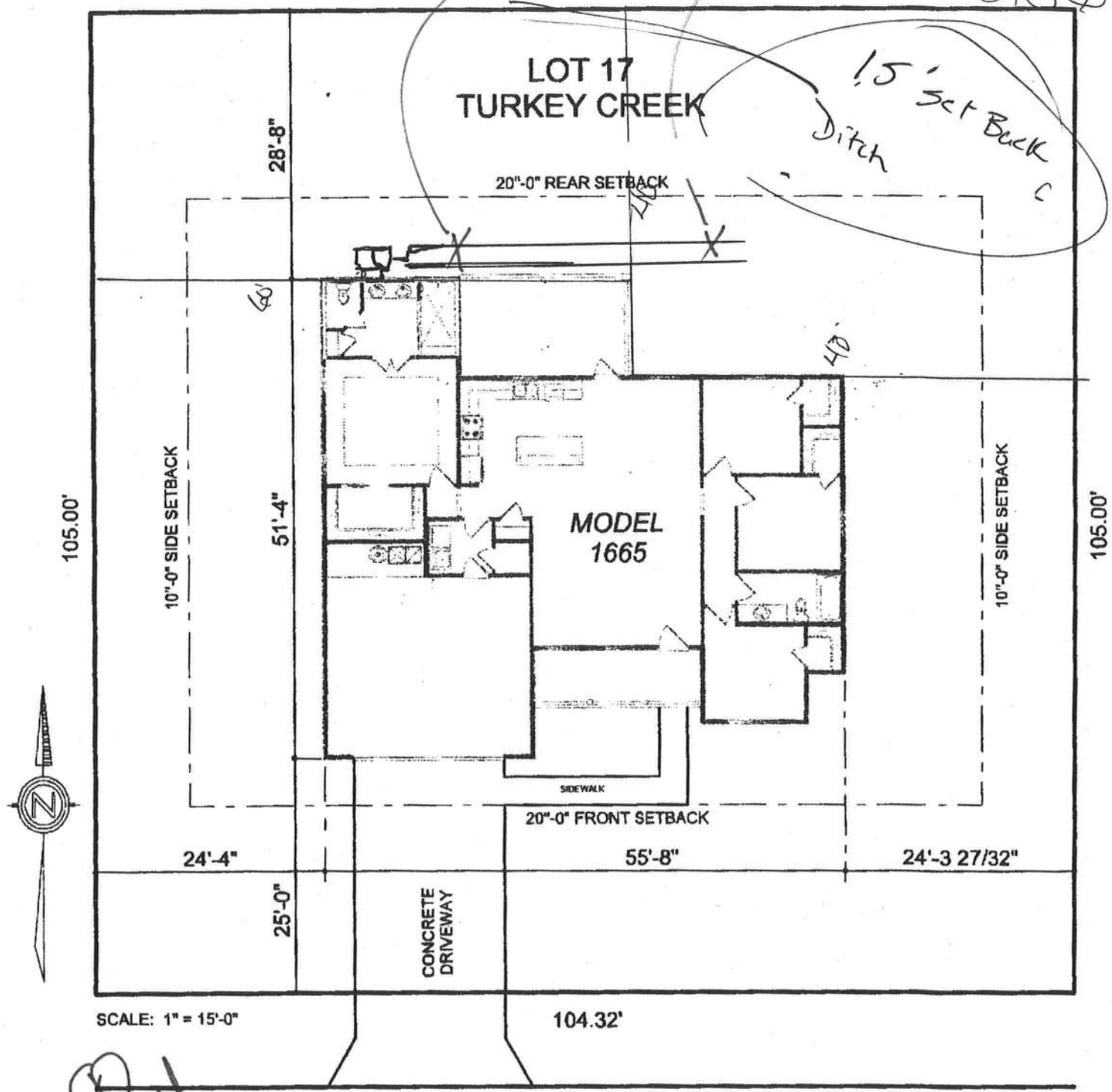


Notes: _____

Site Plan submitted by [Signature] Agent: ☒ Owner: _____ Date: 2/23/22
Plan Approved ☒ Not Approved _____ Date 3/3/22
By [Signature] COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

John Homes II
22-0154



DN

Submitted by Fritz Hand