

ASerial #

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only

(Revised 7-1-15)

Zoning Official

Building Official

AP#

1709-38

Date Received

9-15-17

By

WA

Permit #

35945

Flood Zone

X

Development Permit

Zoning

A-3

Land Use Plan Map Category

A

Comments

Replacing home already removed

FEMA Map#

Elevation

Finished Floor

1' above River

In Floodway

☒ Recorded Deed or

☐ Property Appraiser PO

☒ Site Plan

EH # 17-0625

☒ Well letter OR

☐ Existing well

☐ Land Owner Affidavit

☐ Installer Authorization

☐ FW Comp. letter

☒ App Fee Paid

☐ DOT Approval

☐ Parent Parcel #

☐ STUP-MH

☒ 911 App

☐ Ellisville Water Sys

☒ Assessment

on Property

☐ Out County

☐ In County

☒ Sub VF Form

Property ID #

18-75-16-04236-1105

Subdivision

Cedar Spring Shores

Lot#

90

New Mobile Home

☒

Used Mobile Home

MH Size

14x56

Year

2017

Applicant

Wendy Grennell

Phone #

386-288-2428

Address

3104 SW Old Wire Road Ft. White, FL 32038

Name of Property Owner

Carreen Bandoli

Phone#

352-267-5309

911 Address

372 SW Longhorn Ter, Ft White, FL 32038

Circle the correct power company -

FL Power & Light

Clay Electric

(Circle One) -

Suwannee Valley Electric

Duke Energy

Name of Owner of Mobile Home

Carreen Bandoli

Phone #

352-267-5309

Address

9940 Hidden Grove Road Clermont, FL 34714

Relationship to Property Owner

owner

Current Number of Dwellings on Property

1 Already Removed

Lot Size

Total Acreage

1.290 acres

Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)

(Currently using)

(Blue Road Sign)

(Putting in a Culvert)

(Not existing but do not need a Culvert)

Is this Mobile Home Replacing an Existing Mobile Home

NO

Driving Directions to the Property

St Rd 47 South to Hollingsworth Road
turn right to Bluff Drive, turn right to SW Longhorn
Terrace, turn right, 7th lot on the left.

Name of Licensed Dealer/Installer

Robert Sheppard

Phone #

386-623-2203

Installers Address

6355 CR 245 Lake City, FL 32025

License Number

IH1025386

Installation Decal #

45118

Spoke to Wendy 9-27-17

Wendy faxed Docs in 10-9-17

\$ 325.00

COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.
Submit the originals with the packet.

Installer Robert Sheppard License # 741025386

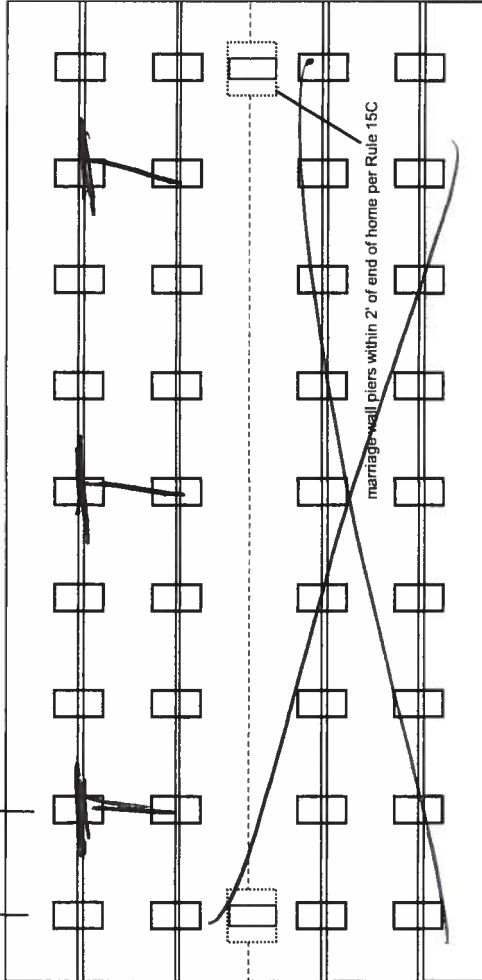
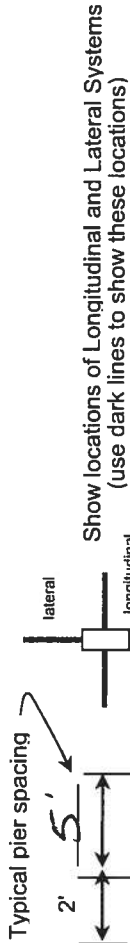
911 Address where home is being installed. 500 Longhorn Terr
Fort White FL 32038

Manufacturer Fleetwood Length x width 76x16

NOTE: if home is a single wide fill out one half of the blocking plan
if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used)
where the sidewall ties exceed 5 ft 4 in.

Installer's initials RS



New Home ☒ Used Home ☐

Home installed to the Manufacturer's Installation Manual ☒

Home is installed in accordance with Rule 15-C ☐

Single wide ☒ Wind Zone II ☒ Wind Zone III ☐

Double wide ☐ Installation Decal # 415118

Triple/Quad ☐ Serial # FL E260 GA 17-63743-A

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 psf	3'	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

* interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17 x 25

Perimeter pier pad size 16 x 16

Other pier pad sizes (required by the mfg.) _____

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening

Pier pad size

4 ft ☒ 5 ft

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer DIVIS 1101V

OTHER TIES

Number 2

Sidewall _____

Longitudinal _____

Marriage wall _____

Shearwall _____

ANCHORS

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil _____ without testing.

x 1500 x 1500 x 1500

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

x 1600 x 1600 x 1500

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

RS Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Sheppard

Date Tested

8-22-17

Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. ✓

Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. ✓

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. ✓

Site Preparation

Debris and organic material removed ✓
Water drainage: Natural Swale ✓ Pad ✓ Other

Fastening multi wide units

Floor: Type Fastener: _____ Length: _____ Spacing: _____
Walls: Type Fastener: _____ Length: _____ Spacing: _____
Roof: Type Fastener: _____ Length: _____ Spacing: _____
For used homes a minimum 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

Type gasket

SW

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

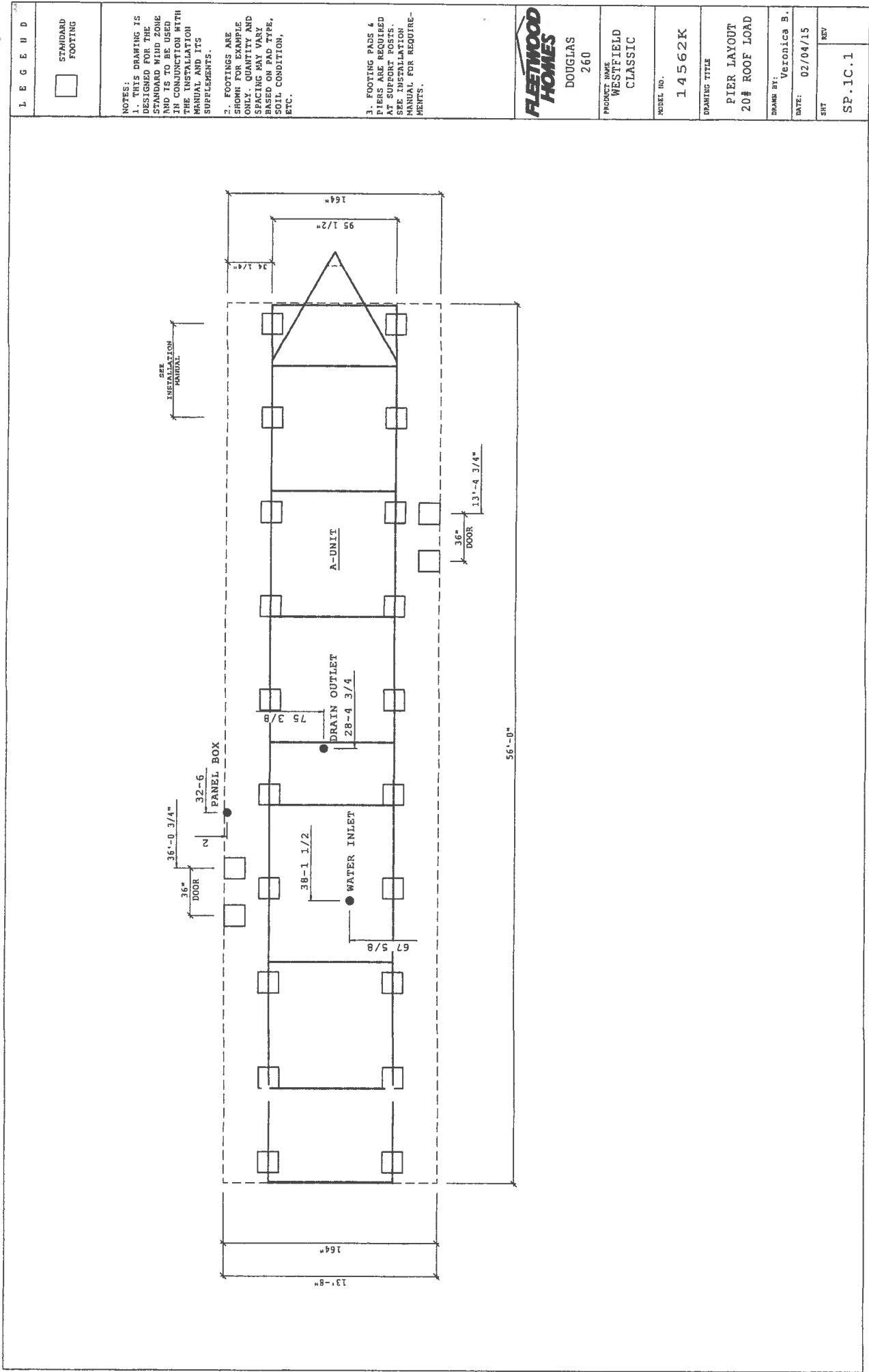
The bottomboard will be repaired and/or taped. Yes ✓ Pg. _____
Siding on units is installed to manufacturer's specifications. Yes ✓
Fireplace chimney installed so as not to allow intrusion of rain water. Yes ✓

Miscellaneous

Skirting to be installed. Yes ✓ No
Dryer vent installed outside of skirting. Yes ✓ N/A
Range downflow vent installed outside of skirting. Yes ✓ N/A
Drain lines supported at 4 foot intervals. Yes ✓
Electrical crossovers protected. Yes ✓
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

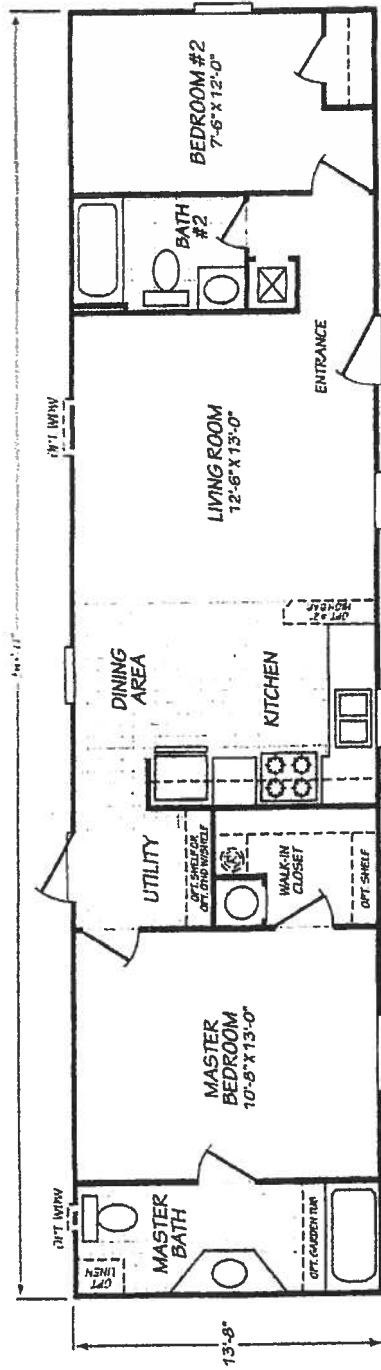
Installer Signature Robert Sheppard Date 8/22/17





WESTFIELD CLASSIC

www.fleetwoodhomes.com

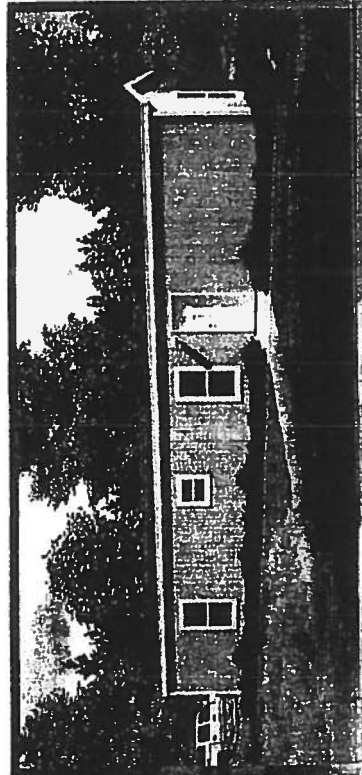


MODEL 14562K

2 Bedroom • 2 Bath • 764 Square Feet

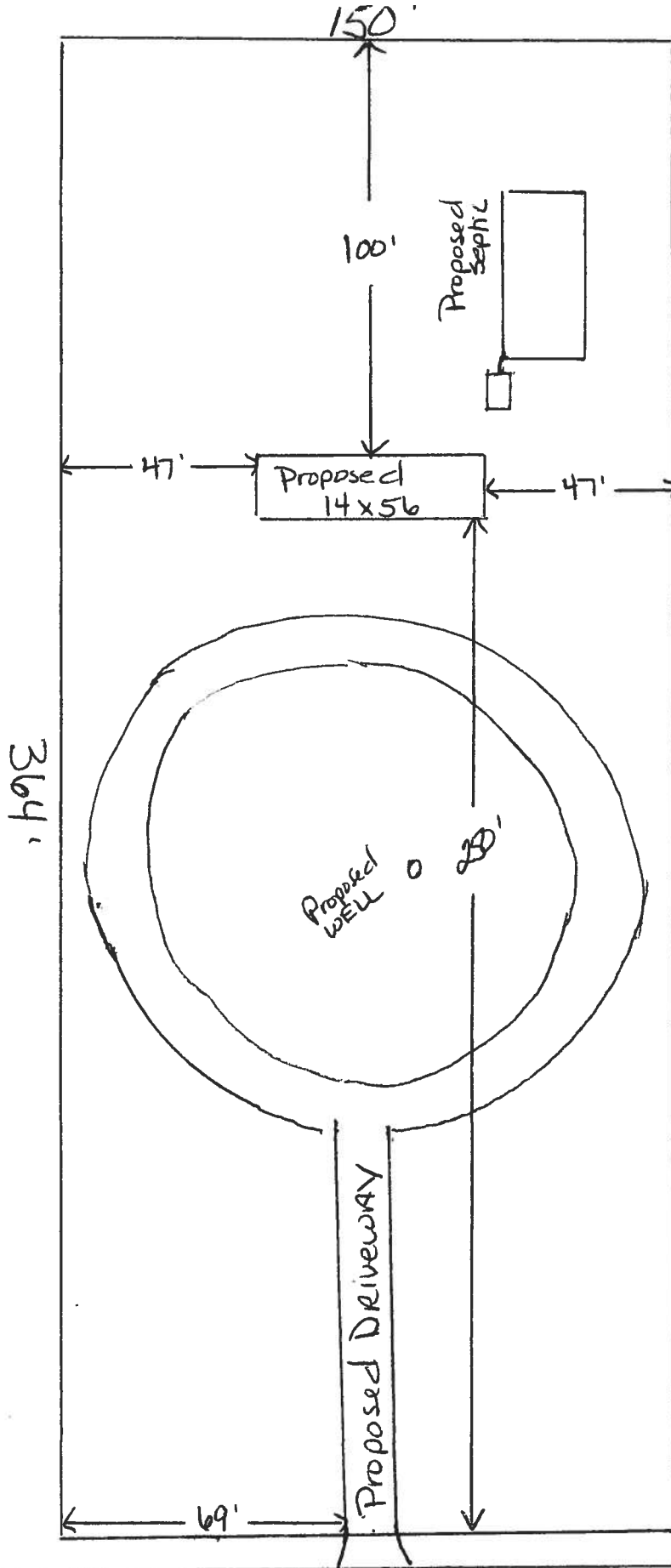
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Important: Because we continually update and modify our products, it is important for you to know that our brochures and literature are for illustrative purposes only. ILLUSTRATIONS MAY SHOW OPTIONAL FEATURES. All information contained herein may vary from the actual home we build. Dimensions are nominal length and width measurements are from exterior wall to exterior wall. We reserve the right to make changes at any time without notice or obligation, in prices, colors, materials, specifications, features and models. Please check with your retailer for specific information about the home you select.



Carreen Bandoli
lot 90 Cedar Springs Shores

Scale 1"=40'



SW Longhorn Terr

REPLAT OF PARTS OF

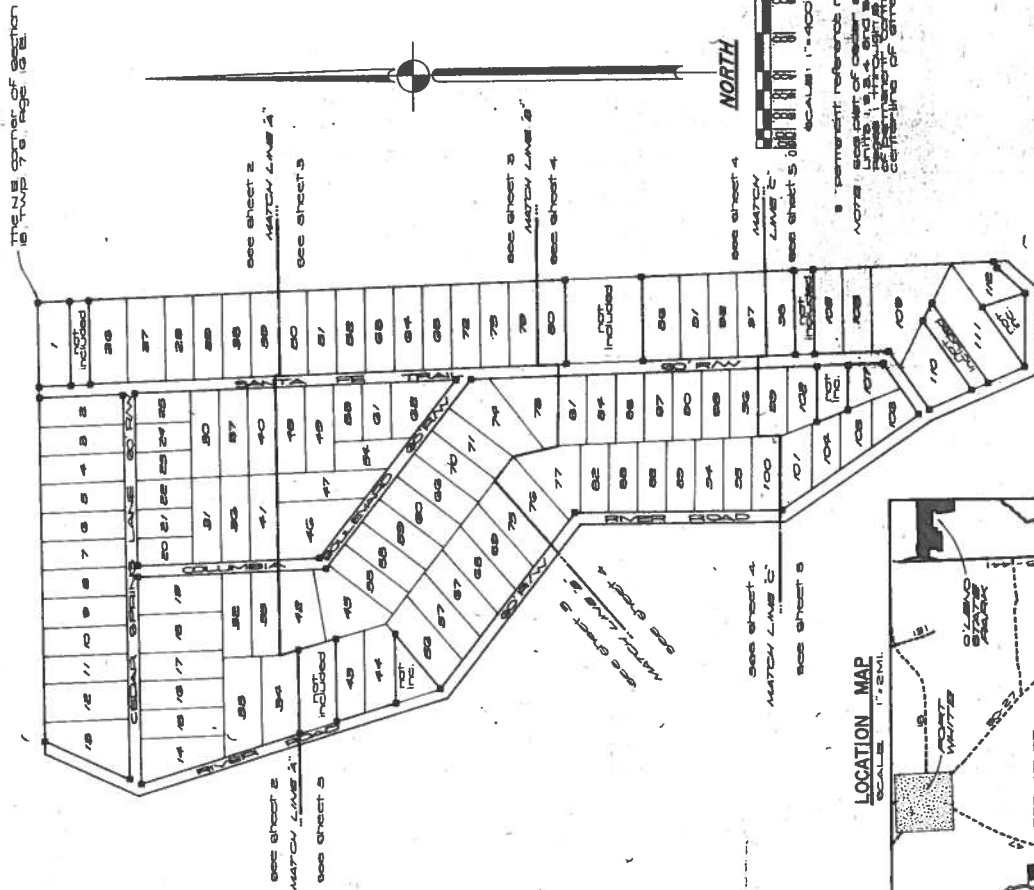
UNITED STATES OF AMERICA



permanent reference monument
public utilities easement line
public utilities & drainage easement line

CEDAR SPRING SHORES – UNITS 1, 2, 3, 4 AND 5

SITUATED IN SECTION 18, TOWNSHIP 7 SOUTH, RANGE 16 EAST
COLUMBIA COUNTY, FLORIDA.



LOCATION MAP

SCALE 1"=2MI.

1

1300

2-27

100

ON CROATIAN
AT YOUNG

ITS 1,3,5,4 AND 2,

—

1

COLLEGE

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LEGAL DESCRIPTION :

[illegible]

ADOPTION & DEDICATION :

1872	1873	1874	1875	1876	1877	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050	2051	2052	2053	2054	2055	2056	2057	2058	2059	2060	2061	2062	2063	2064	2065	2066	2067	2068	2069	2070	2071	2072	2073	2074	2075	2076	2077	2078	2079	2080	2081	2082	2083	2084	2085	2086	2087	2088	2089	2090	2091	2092	2093	2094	2095	2096	2097	2098	2099	2100	2101	2102	2103	2104	2105	2106	2107	2108	2109	2110	2111	2112	2113	2114	2115	2116	2117	2118	2119	2120	2121	2122	2123	2124	2125	2126	2127	2128	2129	2130	2131	2132	2133	2134	2135	2136	2137	2138	2139	2140	2141	2142	2143	2144	2145	2146	2147	2148	2149	2150	2151	2152	2153	2154	2155	2156	2157	2158	2159	2160	2161	2162	2163	2164	2165	2166	2167	2168	2169	2170	2171	2172	2173	2174	2175	2176	2177	2178	2179	2180	2181	2182	2183	2184	2185	2186	2187	2188	2189	2190	2191	2192	2193	2194	2195	2196	2197	2198	2199	2200	2201	2202	2203	2204	2205	2206	2207	2208	2209	2210	2211	2212	2213	2214	2215	2216	2217	2218	2219	2220	2221	2222	2223	2224	2225	2226	2227	2228	2229	2230	2231	2232	2233	2234	2235	2236	2237	2238	2239	2240	2241	2242	2243	2244	2245	2246	2247	2248	2249	2250	2251	2252	2253	2254	2255	2256	2257	2258	2259	2260	2261	2262	2263	2264	2265	2266	2267	2268	2269	2270	2271	2272	2273	2274	2275	2276	2277	2278	2279	2280</
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STATE OF FLORIDA - COUNTY OF COLUMBIA :

[illegible]

COUNTY COMMISSIONER'S APPROVAL :

THIS PLAT IS HEREBY APPROVED BY THE BOARD OF COUNTY COMMISSIONERS OF
COLUMBIA COUNTY FLORIDA THIS DAY OF February A.D. 1972
James Montgomery W. B. Chastain
County Clerk

SURVEYORS CERTIFICATE:

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COLUMBIA COUNTY CLERK'S APPROVAL:

THIS COPY HAS BEEN FILED FOR RECORD IN THE PUBLIC RECORDS OF
COLLEGE PARK, MARYLAND. THIS DAY OF October AD 1978
H. E. Crum Barbara B. B. B.
CLERK DEPUTY CLERK



COLUMBIA COUNTY

911 ADDRESSING / GIS DEPARTMENT

263 NW Lake City Ave., Lake City, FL 32055

Telephone: (386) 758-1125 x 1 * Fax: (386) 758-1365 * Email: gis@columbiacountyfla.com



Address Assignment and Maintenance Document

To maintain the county wide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for addressing and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Services Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County

Date/Time Issued:	9/20/2017 10:04:07 AM
Address:	372 SW LONGHORN Ter
City:	FORT WHITE
State:	FL
Zip Code	32038
Pracel ID	04236-165

REMARKS: Address for proposed structure on parcel.

Address Issued By: **Signed:/ Ronal N. Croft**

Columbia County GIS/911 Addressing Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION AND ACCESS INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION AND/OR ACCESS INFORMATION BE FOUND TO BE IN ERROR OR CHANGED, THIS ADDRESS IS SUBJECT TO CHANGE.

This Document Prepared By and Return to:

Darryl J. Tompkins, Esquire
Darryl J. Tompkins, P.A.
14420 NW 151st Blvd.
P.O. Box 519
Alachua, FL 32616

Inst: 201712016175 Date: 08/28/2017 Time: 10:27AM
Page 1 of 1 B: 1343 P: 1168, P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy Clerk Doc Stamp-Deed: 56.00

Parcel ID Number: R04236-165

Warranty Deed

This Indenture, Made this 19th day of August, 2017 A.D., Between
Gail K. Chivington, a single woman

of the County of Pinellas, State of Florida, grantor, and
Carreen Bandoli, a single woman

whose address is: 9940 Hidden Grove Road, Clermont, FL 34714

of the County of Lake, State of Florida, grantee.

Witnesseth that the GRANTOR, for and in consideration of the sum of

-----TEN DOLLARS (\$10)----- DOLLARS,

and other good and valuable consideration to GRANTOR in hand paid by GRANTEE, the receipt whereof is hereby acknowledged, has
granted, bargained and sold to the said GRANTEE and GRANTEE'S heirs, successors and assigns forever, the following described land, situate,
lying and being in the County of Columbia State of Florida to wit:

Lot 90 of the Replat of parts of CEDAR SPRING SHORES - UNITS 1,2,3,4
AND 5, a Subdivision as per the Plat thereof filed at Plat Book 4,
Pages 20A-20E, of the Public Records of Columbia County, Florida.

SUBJECT TO THE FOLLOWING:

- A. Zoning restrictions, prohibitions and other requirements imposed by governmental authority;
- B. Restrictions and matters appearing on the plat and/or in the public records of Columbia County, Florida; provided, however, the reference herein shall not be deemed to reimpose same;
- C. Taxes for the year 2017 and subsequent years.

and the grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

In Witness Whereof, the grantor has hereunto set her hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Summer Cornell
Printed Name: Summer Cornell
Witness

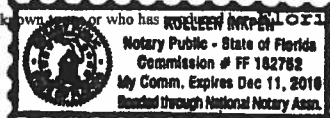
Gail K. Chivington (Seal)
Printed Name: Gail K. Chivington
P.O. Address: 749 Bluff View Drive, Belleair Bluffs, FL 33776

Kolleen Inkpen
Printed Name: Kolleen Inkpen
Witness

STATE OF FLORIDA
COUNTY OF Pinellas

The foregoing instrument was acknowledged before me this 19th day of August, 2017 by
Gail K. Chivington, a single woman

who is personally known to me or who has produced a Florida driver's license as identification



Kolleen Inkpen
Printed Name: Kolleen Inkpen
Notary Public
My Commission Expires:

LOT 90 CEDAR SPRING SHORES
RE-PLAT ORB 451-466, 767-587
780-1753 DC, 809-1111
CHIVINGTON GAIL K
749 BLUFF VIEW DR
BELLEAIR BLUFFS, FL 33770
18-7S-16-04236-165
Columbia County 2017 R
CARD 001 of 001
PRINTED 8/16/2017 13:13
BY JEFF

[illegible][illegible]

BOOK	PAGE	DATE	SALE	PRICE
809	1111	4/14/1995	U	
GRANTOR MARY KRISTAS				
GRANTEE GAIL K CHIVINGTON				
767	587	11/03/1992	U	4200
GRANTOR FLA WOODLAND INC				
GRANTEE GEORGE KRITSAS				
TOTAL				

EXTRA FEATURES-----		FIELD CK:				GRANVILLE GEORGE ANALYSIS													
AE BN CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	UT	PR	PRICE	ADJ	UT	PR	SPCD	%	GOOD	XFOB	VALUE

LAND CODE	DESC	ZONE	ROAD UTIL	TOPO	UTL	FRONT		DEPTH		FIELD CK:		UNITS	UT	PRICE	ADJ	UT PR	LAND VALUE
						{UD1	{UD3	{UD2	{UD4	DT	ADJUSTMENTS						
AE	000000	VAC RES	A-1	0002	0003							1.000	LT	13996.800	13996.80		13,996

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR Robert ShymaPHONE 376 623-2203

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>Michael Rendon</u>	Signature <u>[Signature]</u>
	License #: <u>EC 13002315</u>	Phone #: <u>850-973-0111</u>
	Qualifier Form Attached ☒	
MECHANICAL/ A/C	Print Name <u>Ronald Bonds</u>	Signature <u>Ronald Bonds</u>
	License #: <u>CAC1817658</u>	Phone #: <u>850-769-1453</u>
	Qualifier Form Attached ☐	

Qualifier Forms cannot be submitted for any Specialty License.

Specialty License	License Number	Sub-Contractors Printed Name	Sub Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Revised 10/30/2015



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

LICENSED QUALIFIER AUTHORIZATION

I, Michael Reader (license holder name), licensed qualifier
for MADISON SERVICES LLC (company name), do certify that

the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase and sign permits; call for inspections and sign subcontractor verification forms on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Rocky D Ford</u>	1. <u>[Signature]</u>
2. <u>DAIR L Sural</u>	2. <u>[Signature]</u>
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer(s), you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized persons to use your name and/or license number to obtain permits.

[Signature] License Number EL13702515 Date 11/2/15
Licensed Qualifiers Signature (Notarized)

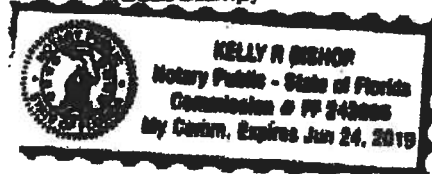
NOTARY INFORMATION:

STATE OF: FL COUNTY OF: Columbia

The above license holder, whose name is Michael Reader
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 2 day of Nov, 2015.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



BANDOLI App 1709-38

Dependable Well Drilling

2139 NW 50TH ST

BELL, FL 32619

(C) 352-225-1618

(F) 386-935-0087

9/21/2017

To: Columbia County Building Department

Description of well to be installed for Customer: Dependable

Located at Address: 2139 NW 50th St Bell FL

1 hp 15 GPM Submersible Pump, 1 1/4" drop pipe, 86 gallon captive tank and back flow prevention, With SRWMD permit.

Randy Smith
Sincerely,

Randy Smith



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

PERMIT NO. 17-0625
DATE PAID: 10/4/17
FEE PAID: 310.00
RECEIPT #: 1339520

APPLICATION FOR:

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

APPLICANT: Carreen BandoliAGENT: Wendy GrennellTELEPHONE: 386-497-2311MAILING ADDRESS: 3104 SW Old Wire Road, 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: 90 BLOCK: na SUB: Cedar Springs Shores Replat PLATTED: 3/2/78

PROPERTY ID #: 18-7S-16-04236-165 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 1.29 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS: SW Longhorn Terr, FW

DIRECTIONS TO PROPERTY: 47 South through Fort White, TR Hollingsworth St, TR Bluff

Dr, TR Longhorn Terr, 1/4 mile on left

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	SF Residential	2	764	Out of AE
2				
3				

☒ Floor/Equipment Drains ☒ Other (Specify) _____

SIGNATURE: Wendy GrennellDATE: 9/8/2017

Brandau App# 1709-38

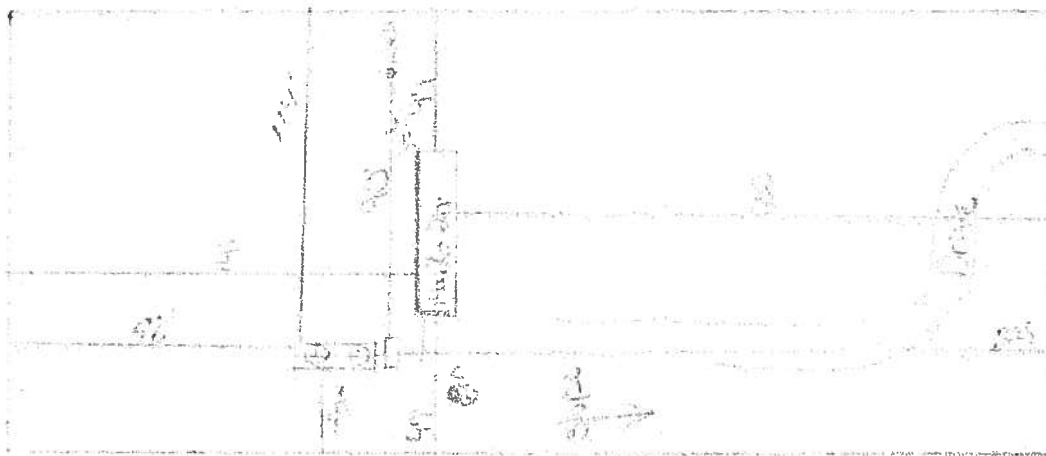
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 17-2625

Amel.

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

Site Plan submitted by:

MASTER CONTRACTOR

Plan Approved *K*

Not Approved

Date 10/6/17

By

Cherry

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT