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

PERMIT NO. 20-0387
DATE PAID: 5/21/20
FEE PAID: 310.00
RECEIPT #: 4505e10

APPLICATION FOR:
[4] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: Katherine Kennedy (Ironwood)
AGENT: North Florida Septic Tank INC TELEPHONE: (386) 755-6372
MAILING ADDRESS: 7418 SE State Rd 100 Lake City, FL 32025

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: — BLOCK: — SUBDIVISION: -NA- PLATTED: 1955

PROPERTY ID #: 34-4S-17-08989-000 ZONING: IM I/M OR EQUIVALENT: [Y (N)]

PROPERTY SIZE: 31.4 ACRES WATER SUPPLY: [4] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y (N)] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 16628 SE Country Club Rd, Lake City, Fl, 32025

DIRECTIONS TO PROPERTY: Turn (L) onto NE Madison ST, Turn (L) onto N. Marion Ave, continue on S Marion Ave, Turn (L) on SW main Blvd, Turn (R) onto CR-133C Turn (R) onto SE Country Club Rd, the destination is on your (R)

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	New mobile home	3b, 2bath	1173 sq ft.	
2				
3				
4				

[✓] Floor/Equipment Drains [ ] Other (Specify) _____

SIGNATURE: Rocky D 7 D DATE: 5/20/20

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

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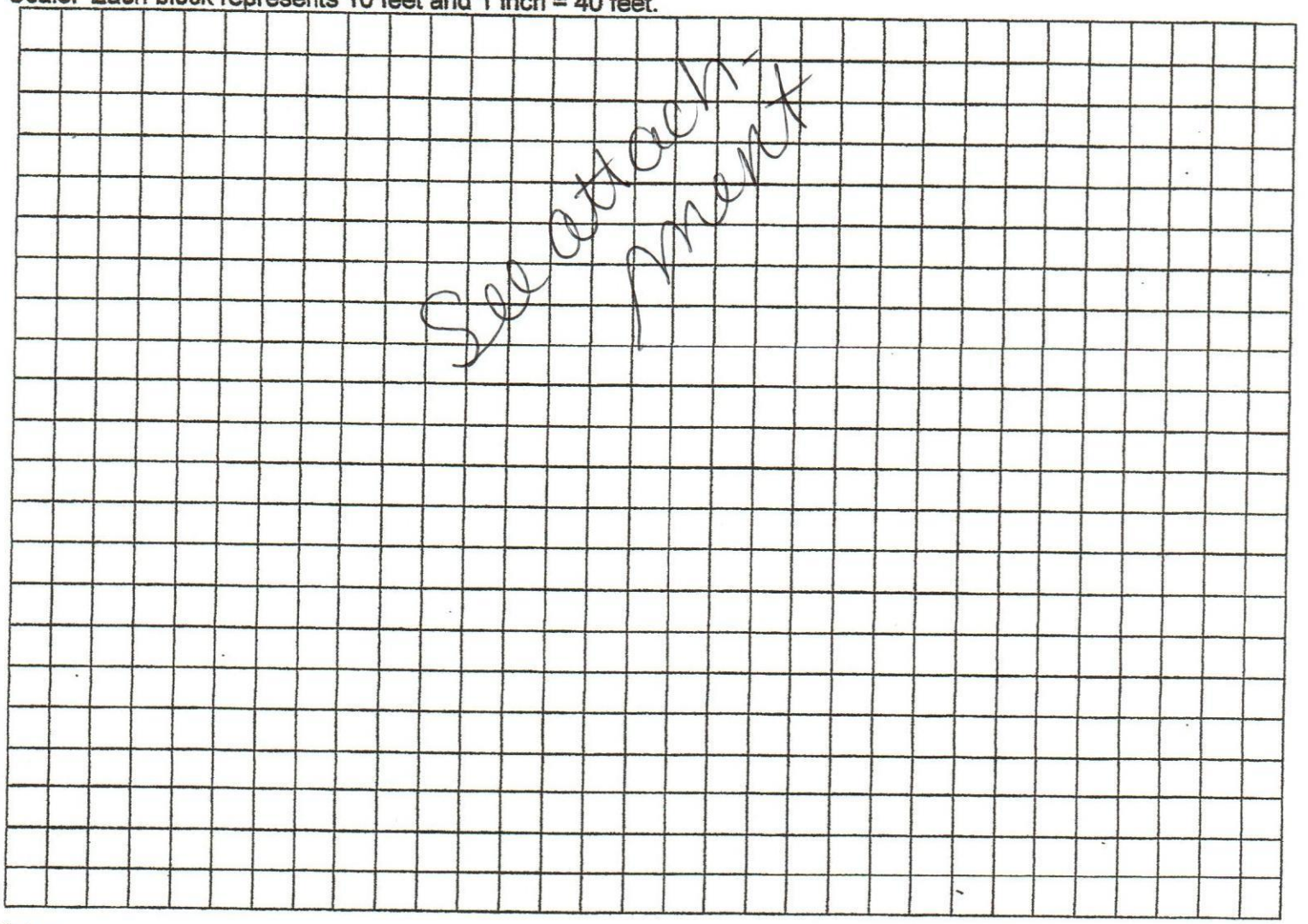
PART II - SITEPLAN

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



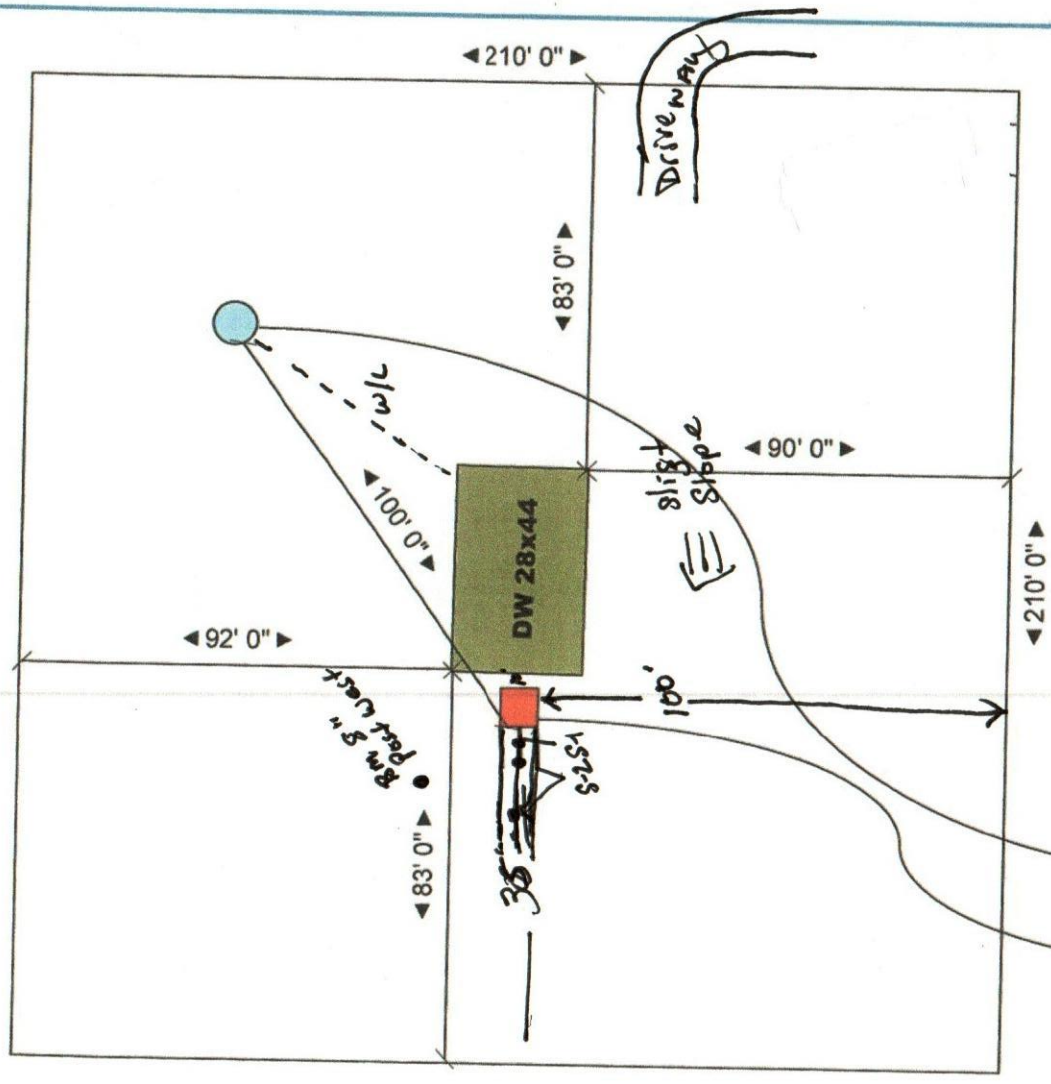
Notes: _____

Site Plan submitted by: Robert W Ford III DATE 5/20/20

Plan Approved X Not Approved _____ Date 5/26/20

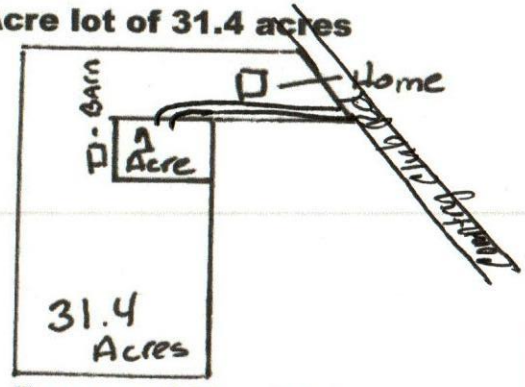
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



Parcel ID: 34-4S-17-08989-000

1 Acre lot of 31.4 acres



Proposed New Well

Proposed New Septic

5-12-2020

Site: TBD SE Country Club Rd, Lake City	**Drawing:** 8010505	**Project:** 0000505	**Drawn:** Heide M	**Notes:**	**H&L Customer Service, LLC** 301 SW Faul Ct Lake City, Fl, 32024 386-984-9334
Title: Katherine Kennedy	**Scale:** 1"=40'	**Date:** 05/05/20	**Rev:** A		

20-0387