



Columbia County Gateway to Florida

#54743

FOR PLANNING USE ONLY

Application # SPD 22 15 (Minor)

Application Fee \$300.00

Receipt No. 760091

Filing Date

Completeness Date 11-14-22

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Minor Site Plan Application

A. PROJECT INFORMATION

1. Project Name: Palms Medical Group Lake City
2. Address of Subject Property: 173 NW Albritton Lane, Lake City, FL 32055
3. Parcel ID Number(s): 20-3S-17-05405-001
4. Future Land Use Map Designation: CG
5. Zoning Designation: CG
6. Acreage: 3.67
7. Existing Use of Property: medical/dental office
8. Proposed use of Property: medical/dental office
9. Type of Development (Check All That Apply):
 - () Increase of floor area to an existing structure: Total increase of square footage 1645
 - () New construction: Total square footage _____
 - () Relocation of an existing structure: Total square footage _____
 - () Increase in Impervious Area: Total Square Footages 1400

B. APPLICANT INFORMATION

1. Applicant Status ☐ Owner (title holder) ☒ Agent
2. Name of Applicant(s): Carol Chadwick, PE Title: Civil Engineer
Company name (if applicable): _____
Mailing Address: 1208 SW Fairfax Glen
City: Lake City State: FL Zip: 32025
Telephone: () 307.680.1772 Fax: () Email: ccpewyo@gmail.com

PLEASE NOTE: Florida has a very broad public records law. Most written communications to or from government officials regarding government business is subject to public records requests. Your e-mail address and communications may be subject to public disclosure.

3. If the applicant is agent for the property owner*,
Property Owner Name (title holder): TRENTON MEDICAL CENTER, INC D/B/A Palms Medical Group
Mailing Address: 23343 NW CR 236
City: High Springs State: FL Zip: 32643
Telephone: () 386.454.0698 Fax: () 386.454.0690 Email: jmillier@palmsg.org

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*Must provide an executed Property Owner Affidavit Form authorizing the agent to act on behalf of the property owner.



1-30-23

C. Breaker