



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

PERMIT NO. 20-0341-E
DATE PAID: 5/6/20
FEE PAID: 60.00
RECEIPT #: AP1982955

APPLICATION FOR:

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

APPLICANT: Alberta ColemanAGENT: H&L Customer Service, LLCTELEPHONE: (386) 974-9324MAILING ADDRESS: 301 SW FAUL CT, LAKE CITY, FL, 32024
heidemorrison@gmail.com

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: _____ PLATTED: _____

PROPERTY ID #: 12-45-15-00347-007 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ NPROPERTY SIZE: 5.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: 100 FTPROPERTY ADDRESS: 1435th Brim Street Lake City, FLDIRECTIONS TO PROPERTY: Turn (L) onto NE Madison St, Turn (L) onto NW Columbia Ave,

Turn (L) onto W Duval St, Turn (L) onto SW County Rd 252-B Turn (L) onto SW Deputy J
Davis Ln, Turn (L) onto SW Pinemont Rd, Turn (L) onto SW Dextle Rd, Turn (L) onto SW
Brim St, Destination is on your (R)

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	Old & New	4 bed/2 bath	2305 sq ft	
2				
3				
4				

☒ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: HeidemorrisonDATE: 05/06/20

