



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM (OSTDS)

PERMIT NO. 26-0390
DATE PAID: 7/30/26
FEE PAID: 600.00
RECEIPT #: 2303822

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

[] New System [☒] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Alpata Earth Rentals LLC EMAIL: provisionpermitting@gmail.com

AGENT: Scorp North 803-517-5101 TELEPHONE: 386-438-0238

MAILING ADDRESS: 830-13 A1A North Ponte Vedra Beach FL 32082

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

OSTDS REMEDIATION PLAN? [Y / N]

LOT: 2 BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 12-35-16-02080-000 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

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

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 154 NW Alpata Ct Lake City FL

DIRECTIONS TO PROPERTY: E on US-441 N, L on NW Valdosta Rd, L on NW Maxmore Dr, L to stay on NW Maxmore Dr, slight L on NW Alpata Ct, property on L

BUILDING INFORMATION

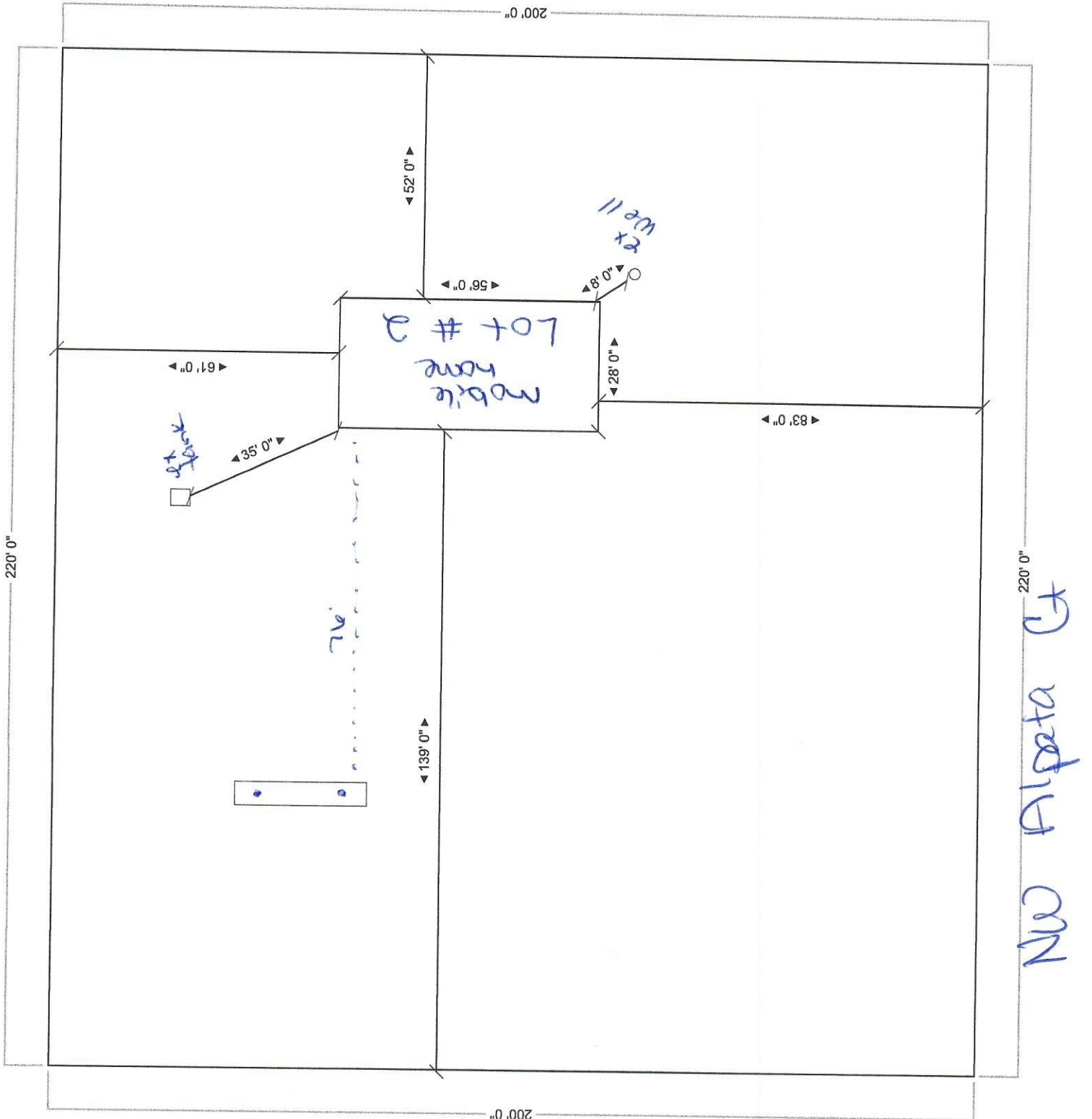
[☒] RESIDENTIAL [] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC
1	<u>mobile home</u>	<u>3</u>	<u>1568</u>	
2	<u>old previous removed mobile home</u>	<u>3</u>	<u>1280</u>	
3				
4				

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

SIGNATURE: Scorp North DATE: _____

24-8390



Permit Application Number _____

26-0390

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

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

A full-page view of a blank sheet of graph paper. The grid consists of small squares formed by thin black lines. There are approximately 20 columns and 20 rows of squares. The paper has a slightly off-white or cream color.

Notes: _____

Site Plan submitted by: Sonja North

Plan Approved ✓ [Signature] Not Approved _____ Date 5/1/26

By [Signature] Colman County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT