

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

Permit Application Number:

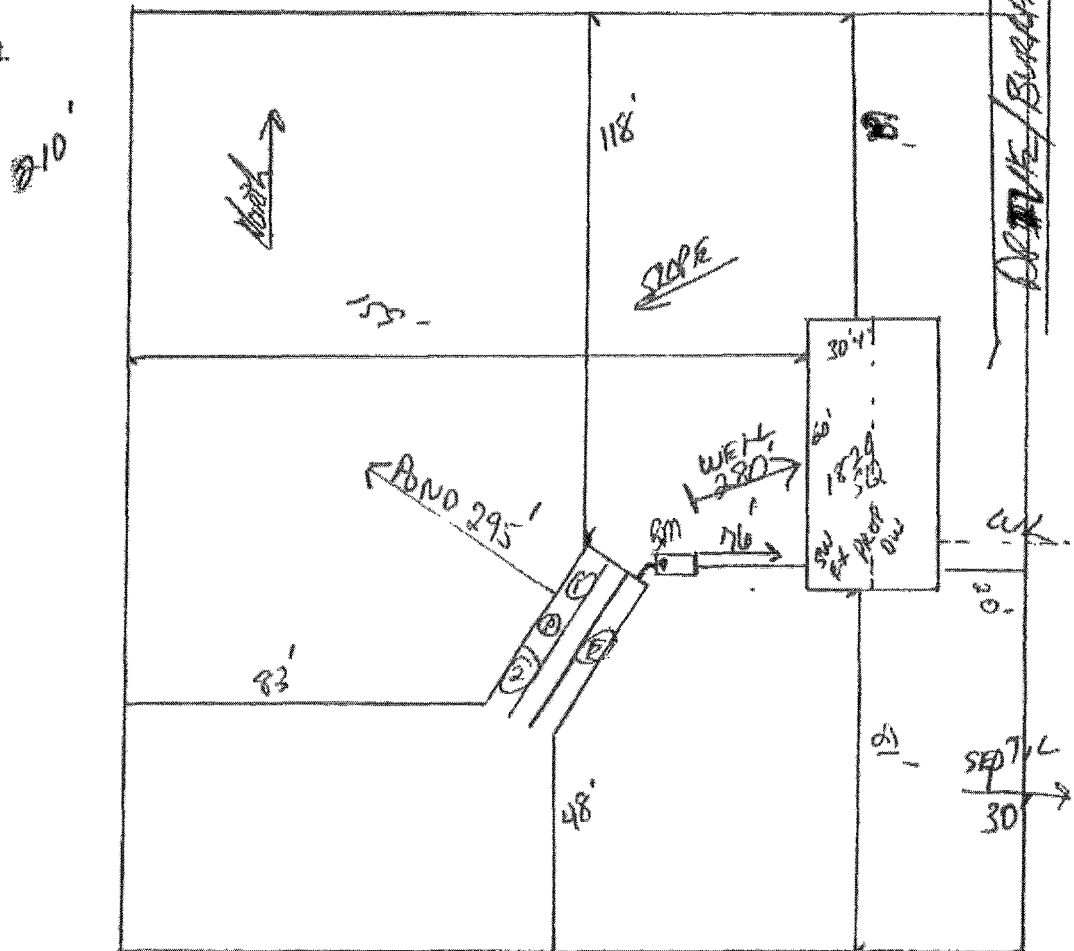
IN PERMIT
16-0244M

BURASS

PART II - SITEPLAN

210

Scale: 1 inch = 40 feet.



Notes:

(P) = PROPOSED (R) EXISTING

1 of 14.23 Acres SRA attached

Site Plan submitted by:

July 27-0

MASTER CONTRACTOR

~~Plan Approved~~

Not Approved

Date 4/2/2016

By [Signature] Colubona County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO. 16-0744M
DATE PAID: 4/8/16
FEE PAID: 125.00
RECEIPT #: 124186

APPLICATION FOR:

[] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary (X) MODIFICATION

APPLICANT: Frank BurrissAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING ADDRESS: 546 SW Dortch Street, 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: na BLOCK: na SUB: na PLATTED: _____PROPERTY ID #: 20-58-17-09301-003 ZONING: ly I/M OR EQUIVALENT: [Y / (N)]PROPERTY SIZE: 14.33 ACRES WATER SUPPLY: (X) PRIVATE PUBLIC [] <=2000GPD [] >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)] DISTANCE TO SEWER: --- FTPROPERTY ADDRESS: 250 SW Burriss Glen, Lake City, FL, 32024

DIRECTIONS TO PROPERTY: Tustnuggee South, At south end of Oaks S/D, TL on Burriss Glen, Follow drive to first house on right

BUILDING INFORMATION:

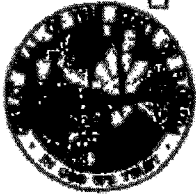
(X) RESIDENTIAL [] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SF Residential	4	1820	
2				
3				

(X) Floor/Equipment Drains (X) Other (Specify) _____SIGNATURE: [Signature]DATE: 4/8/2016

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

FAKED



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMIT

PERMIT #: **12-SC-1674191**APPLICATION #: **AP1234186**

DATE PAID: _____

FEE PAID: _____

RECEIPT #: _____

DOCUMENT #: **PR1015637**CONSTRUCTION PERMIT FOR: OSTDS Existing ModificationAPPLICANT: FRANK**16-0244 BURRESSPROPERTY ADDRESS: 250 SW BURRESS Gln Lake City, FL 32024

LOT: _____ BLOCK _____ SUBDIVISION. _____

PROPERTY ID #: 09301-003

[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]

[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY

SYSTEM DESIGN AND SPECIFICATIONS

T [900] GALLONS / GPD Existing Septic Tank CAPACITY
A [] GALLONS / GPD N/A CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY (MAXIMUM CAPACITY SINGLE TANK 1250 GALLONS)
K [] GALLONS DOSING TANK CAPACITY [] GALLONS [] DOSES PER 24 HRS #Pumps []

D [500] SQUARE FEET Drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM

A TYPE SYSTEM: ☒ STANDARD ☐ FILLED ☐ MOUND []I CONFIGURATION. ☒ TRENCH ☐ BED []

N

F LOCATION OF BENCHMARK: Top of septic system, outlet end.I ELEVATION OF PROPOSED SYSTEM SITE [100] INCHES FT [] ABOVE BELOW BENCHMARK/REFERENCE POINTE BOTTOM OF DRAINFIELD TO BE [2100] INCHES FT [] ABOVE BELOW BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

- 1) The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated flow of 400 gpd.
2.) Modification permit. Do not disturb existing drainfield, instead add 250 SQFT of drainfield to existing 250 SQFT to achieve required area of 500 SQFT
3.) Outlet filter device must remain in place. If it has been removed, one must be installed at inspection

SPECIFICATIONS BY: ROCKY FORD TITLE: Master ContractorAPPROVED BY: [Signature] TITLE: Environmental Specialist I Columbia CHDDATE ISSUED: 04/26/2016 EXPIRATION DATE: 10/26/2017

DH 4916, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

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