

B+Z

SSO 113-405474



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM (OSTDS)

PERMIT NO. 24-0335
DATE PAID: 7/22/24
FEE PAID: 245.96
RECEIPT #: 245757

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Crystal Cari Crosby Hudson EMAIL: CrystalCrosby1995@gmail.com

AGENT: Wayne Crosby TELEPHONE: 904 982 1039

MAILING ADDRESS: 1101 SW TUSTENUGGEE AVE 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

OSTDS REMEDIATION PLAN? [Y / N]

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

PROPERTY ID #: 20-45-17-08585-007 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 1.01 ACRES WATER SUPPLY: A PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 1149 Tustenuggoe Ave Lake City FL 32025

DIRECTIONS TO PROPERTY: _____

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	MH	3	1456	
2				
3				
4				

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

SIGNATURE: Crystal Cari Crosby Hudson DATE: 7/15/24

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

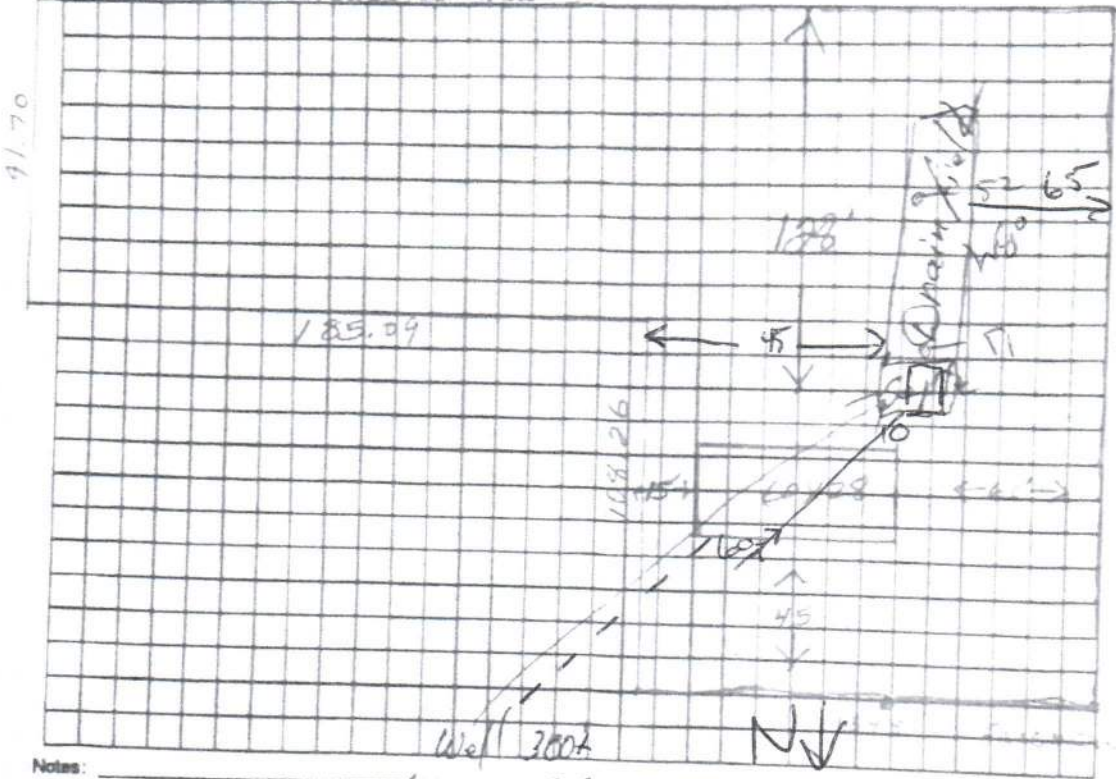
Incorporated 62-6.004, FAC

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Permit Application Number 24-0335

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

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



Notes:

Neighbor will be using my well

Site Plan submitted by Rusty Ann Henry HUDSON

Plan Approved Not Approved Date 4/25/24

By [Signature] ES2 Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT