



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

PERMIT NO. 24-0343
DATE PAID: 4/24/24
FEE PAID: 318.05
RECEIPT #: 2806474

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Blake King (Hudson Homes) EMAIL: _____

AGENT: Tommy Jones TELEPHONE: 352-221-4473

MAILING ADDRESS: 1490 NE 130th St. Trenton, FL. 32693

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: Part of BLOCK: _____ SUBDIVISION: Rosmaria Tract I PLATTED: _____ OSTDS REMEDIATION PLAN? [Y / N]

PROPERTY ID #: 19-55-17-09290-007 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 4.49 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 386 SW Wildwood Ct. Lake City 32024

DIRECTIONS TO PROPERTY: Take us-441 S, @ Fosteur Glenn, @ Wildwood dr @ Wildwood Ct

BUILDING INFORMATION

Unit No	Type of Establishment	[<input checked="" type="checkbox"/>] RESIDENTIAL		[] COMMERCIAL	
		No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC	
1	<u>SFR</u>	<u>3</u>	<u>1792</u>		
2					
3					
4					

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

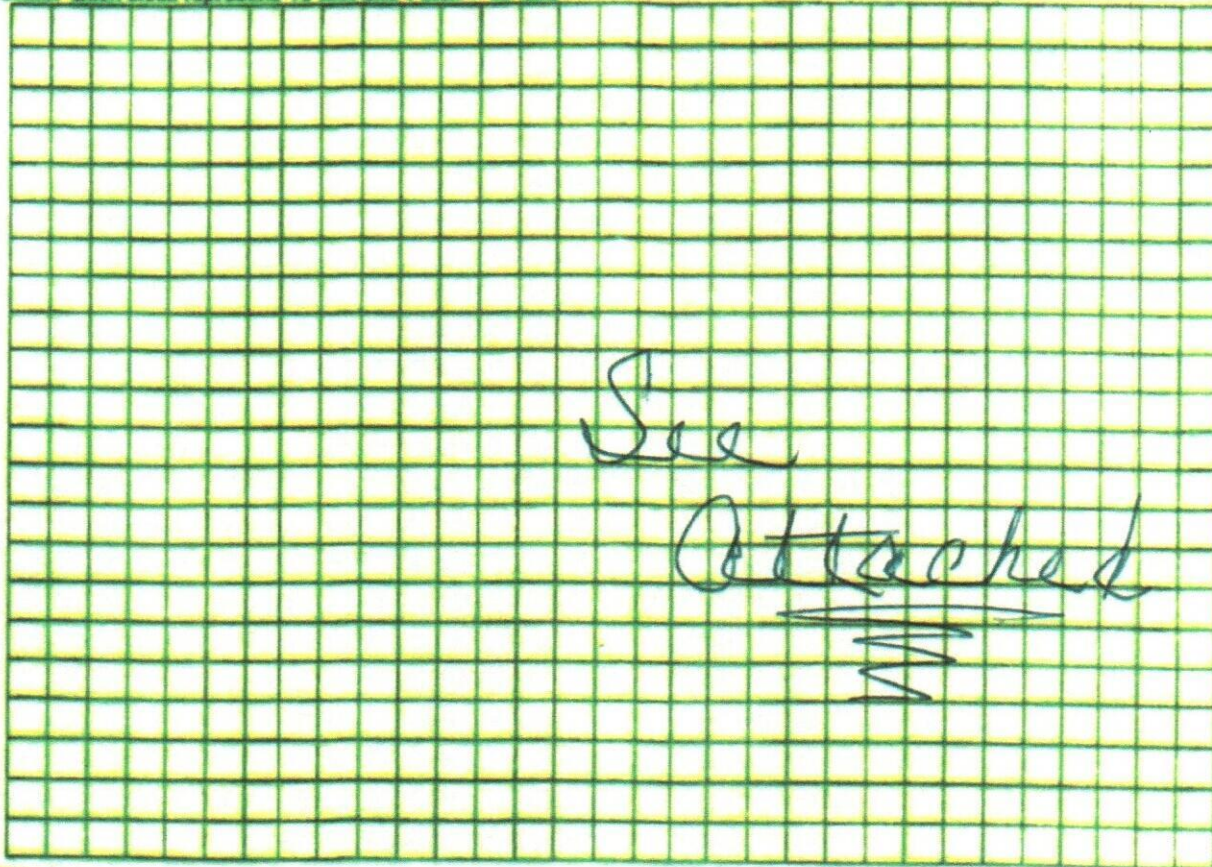
SIGNATURE: [Signature] DATE: 4/17/24

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APPLICATION FOR CONSTRUCTION PERMIT

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..... PART II - SITEPLAN

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



See
Attached
N

Notes: _____

Site Plan submitted by H. Khan

Plan Approved Not Approved Date 4/26/24

By [Signature] ETC Columbia 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

E-MAILED

PERMIT #: 12-SC-2894185
APPLICATION #: AP2066474
DATE PAID: 4/24/24
FEE PAID: 310.00
RECEIPT #: _____
DOCUMENT #: PR2079782

Joshua

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: BLAKE**24-0343 KING
PROPERTY ADDRESS: 386 SW WILDWOOD Lake City, FL 32024
LOT: P/O 6 BLOCK: _____ SUBDIVISION: Rose Marie
PROPERTY ID #: 09290-007 [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 New Multi-Chambered Sentic 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 [375] SQUARE FEET Drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [] STANDARD [x] FILLED [] MOUND []
I CONFIGURATION: [x] TRENCH [] BED []

F LOCATION OF BENCHMARK: Nail with orange ribbon in oak E of site
I ELEVATION OF PROPOSED SYSTEM SITE [13.00] [INCHES] FT [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [19.00] [INCHES] FT [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [12.00] INCHES EXCAVATION REQUIRED: [] INCHES

O
T
H
E
R
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.

SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP
APPROVED BY: [Signature] TITLE: Environmental Specialist I Columbia CHD
DATE ISSUED: 04/26/2024 EXPIRATION DATE: 10/26/2025

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)
Incorporated 62-6.004, FAC

KR-5/1/24

24-0343

Scale 1:100



Blake King
19-SS-17-09290-007

9/17/24

Karen
Kawen
23-2064
9/17/24

