



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

PERMIT NO. 22-0928
DATE PAID: 11/15/22
FEE PAID: 310.00
RECEIPT #: 1911229

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Tommy Brannen

AGENT: Kameron Keen

EMAIL: _____

MAILING ADDRESS: 474 NE 628th St. Old Town, FL 32680

TELEPHONE: 352-356-1333

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: 18 BLOCK: U-1 SUBDIVISION: Price Creek Acres OSTDS REMEDIATION PLAN? Y / N PLATTED: _____

PROPERTY ID #: 12-49-17-08332-017 (30441) ZONING: _____ I/M OR EQUIVALENT: Y / N

PROPERTY SIZE: 3.79 ACRES WATER SUPPLY: PRIVATE PUBLIC <=2000GPD >2000GPD

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

PROPERTY ADDRESS: SE Deer St. Lake City, 32025

DIRECTIONS TO PROPERTY: Take 100 E, TR on Pounds Hammock, TR onto SE Deer St, property on L

BUILDING INFORMATION

Unit No	Type of Establishment	<input checked="" type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> COMMERCIAL	
		No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC	
1	<u>SFR-MH</u>	<u>2</u>	<u>728</u>		
2					
3					
4					

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Kameron Keen 212064 DATE: 11-9-22

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



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

PERMIT #: 12-SC-2604595
APPLICATION #: AP1911227
DATE PAID: 11/15/22
FEE PAID: 310.00
RECEIPT #: _____
DOCUMENT #: PR1877597

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: TOMMY**22-0928 BRANNEN
PROPERTY ADDRESS: SE DEER Lake City, FL 32025
LOT: _____ BLOCK: _____ SUBDIVISION: _____
PROPERTY ID #: 083332-017 [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 _____ 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 [250] SQUARE FEET _____ Drainfield _____ SYSTEM
R [] SQUARE FEET _____ N/A _____ SYSTEM
A TYPE SYSTEM: [] STANDARD [x] FILLED [] MOUND [] _____
I CONFIGURATION: [x] TRENCH [] BED [] _____
N

F LOCATION OF BENCHMARK: Nail w/ pink ribbon in tree near site.
I ELEVATION OF PROPOSED SYSTEM SITE [33.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [39.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [12.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated flow of 200 gpd.
T **Remove all Organic surface material from DF site prior to construction of the Filled / Mound **(Include L&W of
H shoulder/slopes).
E
R

SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP
APPROVED BY: [Signature] TITLE: Environmental Specialist II Columbia CHD
DATE ISSUED: 11/16/2022 EXPIRATION DATE: 05/16/2024
DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

JK



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

Permit Application Number 22-0928

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

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

Brannen

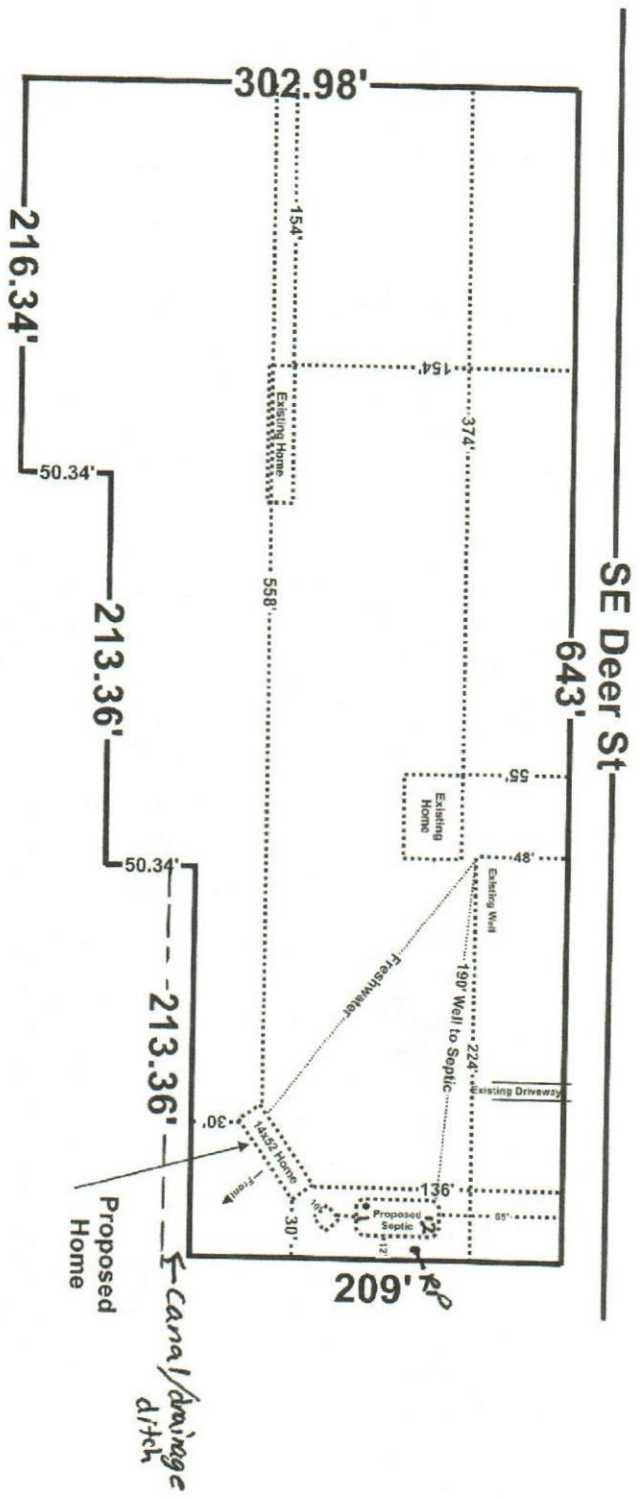
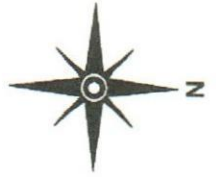
Notes: _____

Site Plan submitted by: *[Signature]*
 Plan Approved Signature *[Signature]* Title 21-2001
 By *[Signature]* Not Approved _____ Date 11-9-22
 _____ County Health Department
11/16/22

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/96 (Replaces HRS-H Form 4016 which may be used)
 (Stock Number: 5744-002-4015-6)

22-0928



Tommy Brannen
 Parcel: 12-4S-17-08332-017
 Lots 17-18 Unit 1
 Lot 24 Unit 2
 Price Creek Acres

Scale 1" = 100'

Thomas Dean
 21-2061
 11-9-22