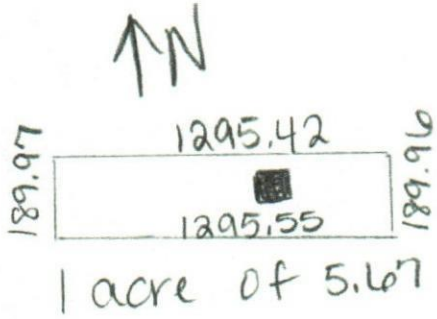


23-0423  
McKinzeu  
lin = 40ft.  
6-7-23



Roddy D 7

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23-0423

McKinze PART II - SITEPLAN

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

See attached

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Plan submitted by: Koch D J master contractor  
Plan Approved  Not Approved \_\_\_\_\_ Date 6/20/23  
By [Signature] [Signature] County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**



# FW

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

PERMIT NO: 23-0423  
DATE PAID: 4/9/23  
FEE PAID: 370.00  
RECEIPT #: 1970944

### APPLICATION FOR CONSTRUCTION PERMIT

#### APPLICATION FOR:

- New System     Existing System     Holding Tank     Innovative
- Repair     Abandonment     Temporary

APPLICANT: Michael & Alice McKinney EMAIL: rockyford@windstream.net

AGENT: A&B Construction TELEPHONE: 380-497-2311

MAILING ADDRESS: 546 SW Dorch St, Ft. White, FL.

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: 1 BLOCK: NA SUBDIVISION: Buie's Retreat PLATTED: \_\_\_\_\_

PROPERTY ID #: 26-78-16-04336-001 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 5.67 ACRES WATER SUPPLY:  PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

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

PROPERTY ADDRESS: 366 SW Rum Island Ter, Ft. White, FL.

DIRECTIONS TO PROPERTY: TR onto FL-475, TL onto US Hwy 27, TR onto SW CR 138, TL onto SW Rum Island Ter

#### 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	SF Residential	3	2023	
2				
3				
4				

[ ] Floor/Equipment Drains    [ ] Other (Specify) \_\_\_\_\_

SIGNATURE: Rocky Ford DATE: 6-7-23



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM

PERMIT #: 12-SC-2735852  
APPLICATION #: AP1970946  
DATE PAID: 6/9/23  
FEE PAID: 310.00  
RECEIPT #:  
DOCUMENT #: PR1964503

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: MICHAEL\*\*23-0423 McKINZEY  
PROPERTY ADDRESS: 366 SW RUM ISLAND Fort White, FL 32038  
LOT: 1 BLOCK: SUBDIVISION: Buie's Retreat  
PROPERTY ID #: 04336-001 [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 [ 375 ] SQUARE FEET Drainfield SYSTEM  
R [ ] SQUARE FEET N/A SYSTEM  
A TYPE SYSTEM: [X] STANDARD [ ] FILLED [ ] MOUND [ ]  
I CONFIGURATION: [X] TRENCH [ ] BED [ ]

F LOCATION OF BENCHMARK: Nail in oak N. of site.

I ELEVATION OF PROPOSED SYSTEM SITE [ 12.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 42.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [ 0.00 ] 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: ROCKY D FORD TITLE: Master Seal

APPROVED BY: Dustin W Jones TITLE: Environmental Specialist II Columbia CHD

DATE ISSUED: 06/20/2023 EXPIRATION DATE: 12/20/2024

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC