

FW

550 063 607 593



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

PERMIT NO. 24-8221
DATE PAID: 3/4/26
FEE PAID: 425.188
RECEIPT #: 2292020

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Matthew & Jillian Shackley EMAIL: ldeen@straightlinefl.com
AGENT: Straight Line Construction (Lisa Deen) TELEPHONE: 352-857-9794
MAILING ADDRESS: 3101 SW 34th Ave, Suite 101, Ocala, FL 34474

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: 1999

PROPERTY ID #: 24-75-16-04317-131 ZONING: AG3 I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 10.1 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☐ N DISTANCE TO SEWER: 15 FT

PROPERTY ADDRESS: 631 SW Unity Ct., Fort White

DIRECTIONS TO PROPERTY: Take SW US Hwy 27 to SW City Rd 138 take L. Go to SW Unity Ct. take Right. Property on right.

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	SFR	3	1512	existing
2	Addition	4	1200 + (410 porch into living area)	
3				
4				

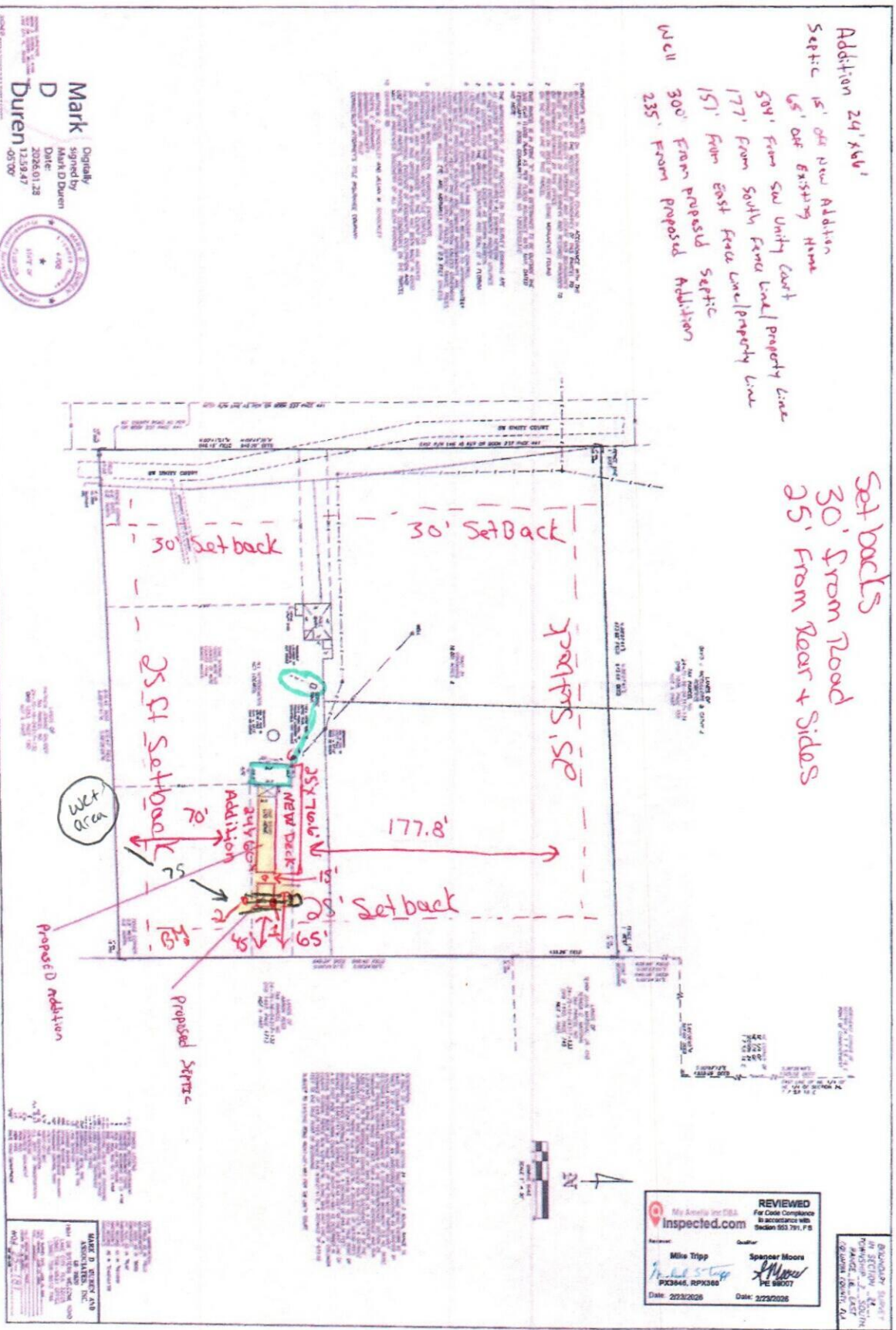
☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Lisa Deen DATE: 3/3/26

24-0221

Addition 24' x 6'
Septic 15' off new Addition
15' off Existing Home
50' From Sewer Utility East
17' From South Fence Line Property Line
15' From East Fence Line Property Line
30' From Proposed Septic
235' From Proposed Addition
Well

Setbacks
30' from Road
25' from Rear + Sides



Mark
Signed by
Date
2026.01.28
Duren
-05.00'



REVIEWED
For Code Compliance
in accordance with
Section 553.791, P.S.
My America Inc DBA
Inspected.com
Mike Tripp
Inspector
PX3046, RPK360
Date: 2/23/2026
Spencer Moon
Inspector
PX3046, RPK360
Date: 2/23/2026

Columbia
3/13/26



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

PERMIT #: **12-SC-4084096**
APPLICATION #: **AP2293230**
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____
DOCUMENT #: **PR2376386**

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: MATTHEW***26-0221 SHOCKLEY
PROPERTY ADDRESS: 631 SW UNITY Ct Fort White, FL 32038
LOT: _____ BLOCK: _____ SUBDIVISION: _____
PROPERTY ID #: 04317-131 [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 [500] GALLONS / GPD Aerobic Treatment Unit 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 tree w/ green ribbon SE of system site

I ELEVATION OF PROPOSED SYSTEM SITE [63.00] [INCHES] FT [] [BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [81.00] [INCHES] FT [] [BELOW] BENCHMARK/REFERENCE POINT

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

O 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.
T New septic system for addition only - 4 bedrooms, existing home is treated by existing septic towards front of property.
H System will be 50% nitrogen reducing ATU as required by BMAP restriction in code, using a 24" water table separation.
E Nitrogen reducing NSF-245 certified aerobic treatment unit required." Maintenance contract and operating permitting also
R required. Maintenance contract with fee also required before final system approval.

SPECIFICATIONS BY: Sean P Havens TITLE: Environmental Specialist II

APPROVED BY: Sean P Havens TITLE: Environmental Specialist II Columbia CHD

DATE ISSUED: 03/20/2026 EXPIRATION DATE: 09/20/2027

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