



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

PERMIT #: 12-SC-3003339  
APPLICATION #: AP2148819  
DATE PAID: 10/1/24  
FEE PAID: 70.00  
RECEIPT #: \_\_\_\_\_  
DOCUMENT #: PR2168864

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: DAVID\*\*24-0735 KIRKMAN  
PROPERTY ADDRESS: SW DRAKE Fort White, FL 32038  
LOT: PARCEL 12 BLOCK: \_\_\_\_\_ SUBDIVISION: Three River Estates  
PROPERTY ID #: 00519-112 [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 [ 1,050 ] GALLONS / GPD New Multi-Chambered Septic 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 [ 500 ] SQUARE FEET Drainfield SYSTEM  
R [ ] SQUARE FEET N/A SYSTEM  
A TYPE SYSTEM: [X] STANDARD [ ] FILLED [ ] MOUND [ ] \_\_\_\_\_  
I CONFIGURATION: [X] TRENCH [ ] BED [ ] \_\_\_\_\_

N  
F LOCATION OF BENCHMARK: Nail with pink ribbon in oak E of system  
I ELEVATION OF PROPOSED SYSTEM SITE [ 25.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 55.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

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

O  
T  
H  
E  
R  
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.

SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP

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

DATE ISSUED: 10/07/2024 EXPIRATION DATE: 04/07/2026

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

KR

# FW



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

PERMIT NO. 24-1735  
DATE PAID: 10/11/24  
FEE PAID: 310.00  
RECEIPT #: 248819

### APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: David Kirkman

EMAIL: \_\_\_\_\_

AGENT: Kameron Keen

TELEPHONE: 352-356-1333

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

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 /  ]

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: Parcel #12 Three Rivers Estates PLATTED: \_\_\_\_\_

PROPERTY ID #: 25-65-15-00519-112 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT:  [ Y /  ]

PROPERTY SIZE: 10.14 ACRES WATER SUPPLY:  PRIVATE PUBLIC  <=2000GPD  >2000GPD

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

PROPERTY ADDRESS: TBD SW Drake Place Ft. White 32008

DIRECTIONS TO PROPERTY: Take FL-475, @ SW Elm Church Rd, @ Junction Rd, R. US-27 N, @ SW Utah St, @ Roberts Ave, @ SW Kentucky St, take SW Drake pl. Parcel on @

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	<u>SFR MH</u>	<u>4</u>	<u>1600</u>	
2				
3				
4				

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

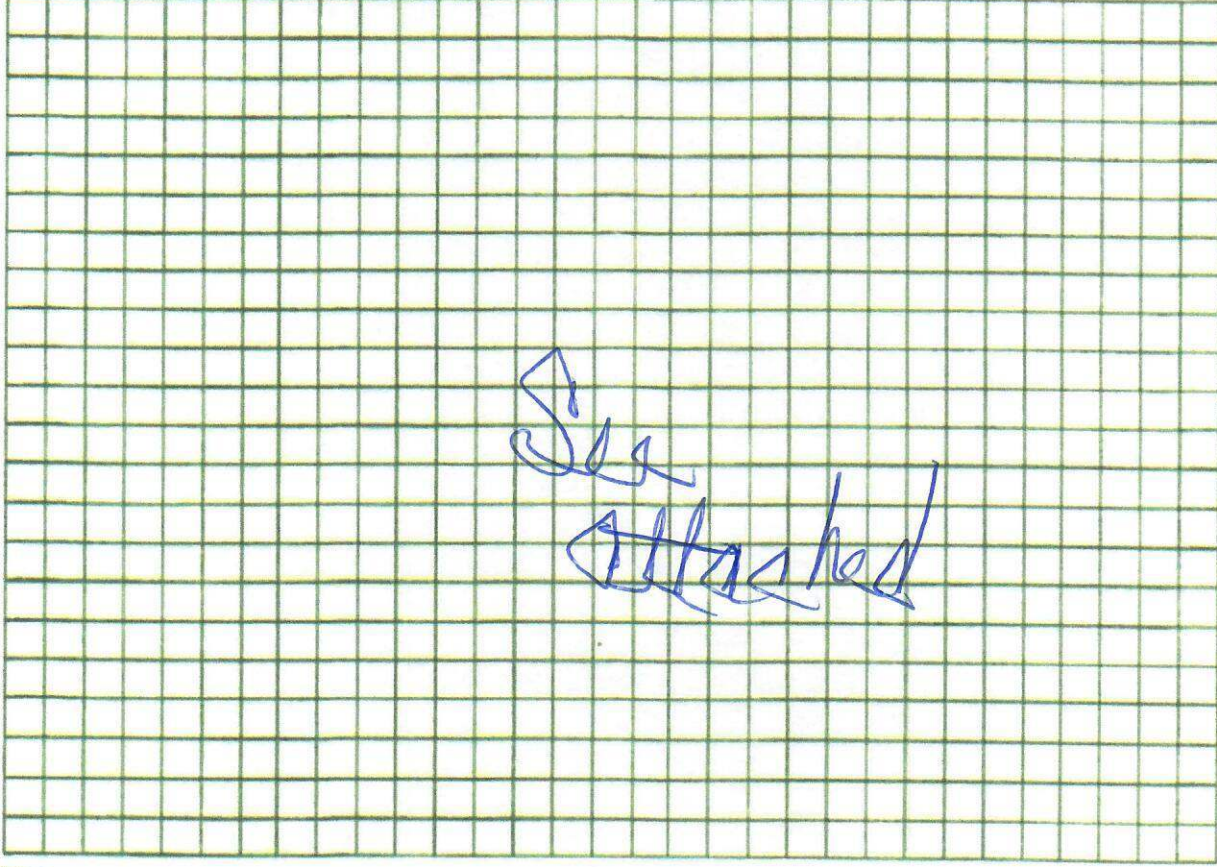
SIGNATURE: Kameron Keen 23-2064 DATE: 9/24/24

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 24-0225

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

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



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

Site Plan submitted by H. Kern 23-2064

Plan Approved  Not Approved \_\_\_\_\_ Date 10/24  
By [Signature] CSZ Columbia County Health Department

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

