



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION INSPECTION AND FINAL APPROVAL

APPLICATION #: AP2227491
PERMIT #: 12-SC-3152926
DOCUMENT #: F12552725
DATE PAID: 06/30/2025
FEE PAID: 425.00
RECEIPT #: 12-PID-7479889

APPLICANT: MARTHA**25-0534 NEWBERN
AGENT: _____
PROPERTY ADDRESS: 355 SW MAYO Rd Lake City, FL 32024
LOT: _____ BLOCK: _____
SUBDIVISION: _____ ID#: 00213-002

CHECKED [X] ITEMS ARE NOT IN COMPLIANCE WITH STATUTE OR RULE AND MUST BE CORRECTED.

TANK INSTALLATION		SETBACKS	
[IN]	[01] TANK SIZE [1] <u>1050.00</u> [2] _____	[N/]	[27] SURFACE WATER _____ FT
[IN]	[02] TANK MATERIAL _____ Concrete	[N/]	[28] DITCHES _____ FT
[IN]	[03] OUTLET DEVICE _____	[IN]	[29] PRIVATE WELLS _____ 100+ FT
[IN]	[04] MULTI-CHAMBERED [<input checked="" type="checkbox"/> Y / <input type="checkbox"/> N]	[N/]	[30] PUBLIC WELLS _____ FT
[IN]	[05] OUTLET FILTER <u>Tuf-Tite EF-4</u>	[N/]	[31] IRRIGATION WELLS _____ FT
[IN]	[06] LEGEND 1. <u>63-136-10DC3</u> 2. _____	[]	[32] POTABLE WATER _____ 12 FT
[IN]	[07] WATERTIGHT _____	[]	[33] BUILDING FOUNDATIONS _____ 12 FT
[IN]	[08] LEVEL _____	[IN]	[34] PROPERTY LINES _____ 8 FT
[IN]	[09] DEPTH TO LID _____	[N/]	[35] OTHER _____ FT
DRAINFIELD INSTALLATION		FILLED / MOUND SYSTEM	
[IN]	[10] AREA [1] <u>375</u> [2] _____ SQFT	[N/]	[36] DRAINFIELD COVER _____
[IN]	[11] DISTRIBUTION BOX _____ HEADER <u>X</u>	[N/]	[37] SHOULDERS _____
[IN]	[12] NUMBER OF DRAINLINES 1. <u>5.00</u> 2. _____	[N/]	[38] SLOPES _____
[IN]	[13] DRAINLINE SEPARATION _____	[N/]	[39] STABILIZATION _____
[IN]	[14] DRAINLINE SLOPE _____	ADDITIONAL INFORMATION	
[IN]	[15] DEPTH OF COVER _____	[IN]	[40] UNOBSTRUCTED AREA _____
[IN]	[16] ELEVATION [ABOVE / <input checked="" type="checkbox"/> BELOW] BM <u>34.00</u>	[IN]	[41] STORMWATER RUNOFF _____
[IN]	[17] SYSTEM LOCATION _____	[N/]	[42] ALARMS _____
[N/]	[18] DOSING PUMPS _____	[N/]	[43] MAINTENANCE AGREEMENT _____
[N/]	[19] AGGREGATE SIZE _____	[IN]	[44] BUILDING AREA _____
[N/A]	[20] AGGREGATE EXCESSIVE FINES _____	[IN]	[45] LOCATION CONFORMS WITH SITE PLAN _____
[N/]	[21] AGGREGATE DEPTH _____	[IN]	[46] FINAL SITE GRADING _____
FILL / EXCAVATION MATERIAL		[IN]	[47] CONTRACTOR <u>BARTON ANDREWS (ANDR</u>
[N/]	[22] FILL AMOUNT _____	[IN]	[48] OTHER <u>INFILTRATOR ARC 24</u>
[N/]	[23] FILL TEXTURE _____	ABANDONMENT	
[N/]	[24] EXCAVATION DEPTH _____	[N/]	[49] TANK PUMPED _____
[N/]	[25] AREA REPLACED _____	[N/]	[50] TANK CRUSHED & FILLED _____
[N/]	[26] REPLACEMENT MATERIAL _____		

Comments: Comments are on page 2.

CONSTRUCTION [APPROVED / DISAPPROVED]: _____ Columbia CHD DATE: 08/20/2025
Environmental Specialist Sean P Havens (Florida Department of Health)
FINAL SYSTEM [APPROVED / DISAPPROVED]: _____ Columbia CHD DATE: 11/18/25

(Explanation of Violations on following page)