



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

PERMIT NO. 23-0441
DATE PAID: 6/14/23
FEE PAID: 60.00
RECEIPT #: AP1971884

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:
 New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary _____

APPLICANT: Tracy Davis EMAIL: tmwddavis@outlook.com

AGENT: _____ TELEPHONE: 386-292-9574

MAILING ADDRESS: 888 SW King St., Lake City, FL Cell# 386-344-3345

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: _____

PROPERTY ID #: 35-45-16-03282-019 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 8.12 ACRES WATER SUPPLY: PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 888 SW King St., Lake City, FL 32024

DIRECTIONS TO PROPERTY: _____

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>48x30 accessory</u>	<u>0</u>	<u>1440</u>	_____
2	<u>30x25 accessory</u>	<u>0</u>	<u>750</u>	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Tracy Davis DATE: 6-14-23

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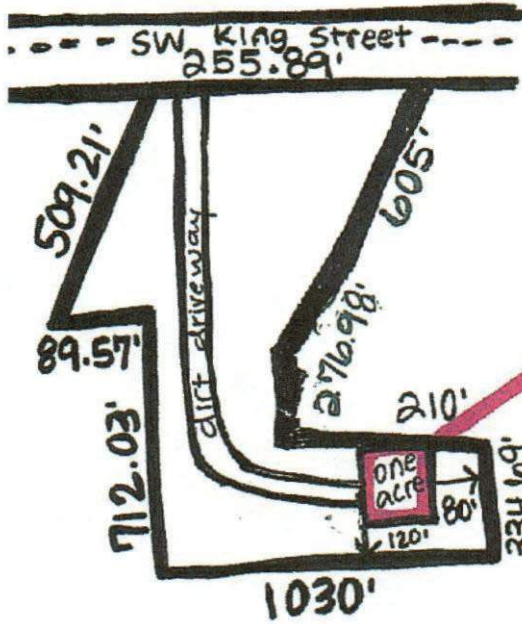
Permit Application Number 23-0228

NEW SYSTEM

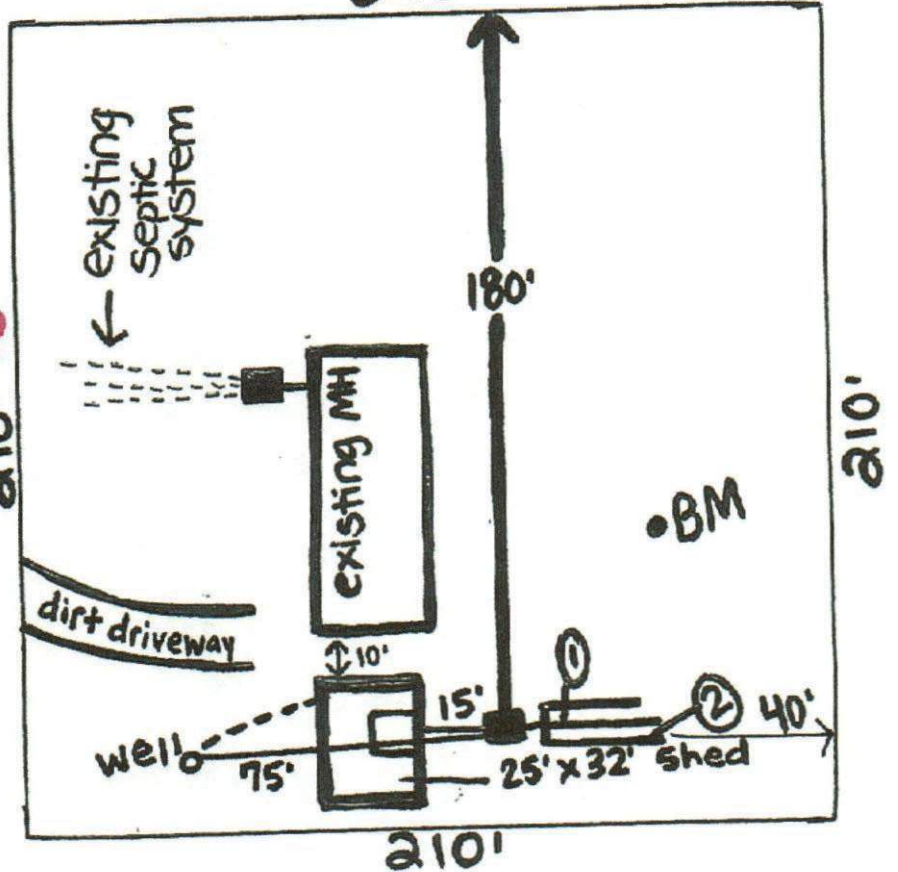
PART II - SITEPLAN

(scale: one inch = 50 feet)
 one acre details
 210'

NORTH ↑



Entire parcel is 8.12 acres. NOT drawn to scale.



Notes: Columbia County, Florida parcel id #: 35-45-16-03282-019
 Address: 888 SW King Street
Lake City, Florida 32024

Site Plan submitted by: [Signature] - RONALD FORD
 Plan Approved Not Approved
 By Cassandra Bonds ESI Columbia County Health Department
 Date 3/23/2023

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT