



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



E-MAILED

K. Keen 4/8/26

PERMIT #: **12-SC-4107542**  
APPLICATION #: **AP2308176**  
DATE PAID: \_\_\_\_\_  
FEE PAID: \_\_\_\_\_  
RECEIPT #: \_\_\_\_\_  
DOCUMENT #: **PR2387392**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: JUSTIN\*\*26-0458 STEEDLEY

PROPERTY ADDRESS: SW BAYBERRY Gln Fort White, FL 32038

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

PROPERTY ID #: 03816-403 [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 [ 400 ] 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 [ 282 ] 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 red ribbon in oak tree

I ELEVATION OF PROPOSED SYSTEM SITE [ 32.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [ 62.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

L

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

O 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.

T

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: (Joshua) Kameron Keen TITLE: CEHP

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

DATE ISSUED: 06/04/2026 EXPIRATION DATE: 12/04/2027

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

Incorporated 62-6.004, FAC

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

PERMIT NO. 26-0458  
DATE PAID: 3/1/26  
FEE PAID: 318.00  
RECEIPT #: 2988124

## APPLICATION FOR CONSTRUCTION PERMIT

## APPLICATION FOR:

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

APPLICANT: Justin Steedley

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

AGENT: Keen Permitting LLCTELEPHONE: 352-356-1333MAILING 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? ☒ / N

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 12-6s-16-03816-403 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☒ / NPROPERTY SIZE: 20.2 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPDIS SEWER AVAILABLE AS PER 391.0065, FS? ☒ / N DISTANCE TO SEWER: \_\_\_\_\_ FTPROPERTY ADDRESS: SW Bayberry Glen, Ft White 32038

DIRECTIONS TO PROPERTY: TL on US-441 S, TL on US-41 S, TR  
on Fostewr Glen Rd, TR on SW Herlong St, TL on  
Choctaw Ave, TR on SW Bayberry Glen, property at end

## 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-MH                | 3               | 1920               |                                                                   |
| 2        |                       |                 |                    |                                                                   |
| 3        |                       |                 |                    |                                                                   |
| 4        |                       |                 |                    |                                                                   |

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_SIGNATURE: Homean Steedley 25-2064 DATE: 5/27/2026

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

Incorporated 62-6.004, FAC

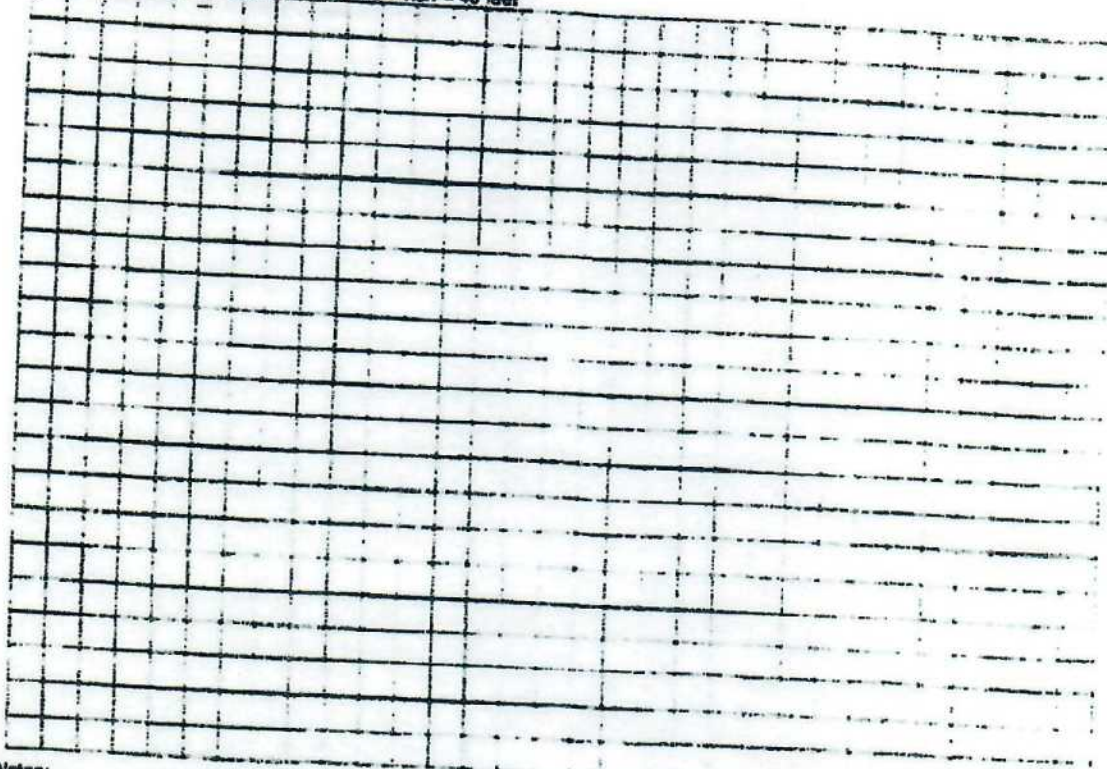
STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

26-0458

PART II - SITEPLAN

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



Notes:

Site Plan submitted by

*Sharon Allen*

Plan Approved ☒

Not Approved ☐

By

*[Signature]*

Columbia

CEHP 25-2064

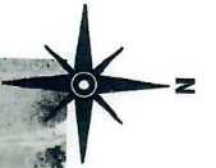
Date

6/4/26

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

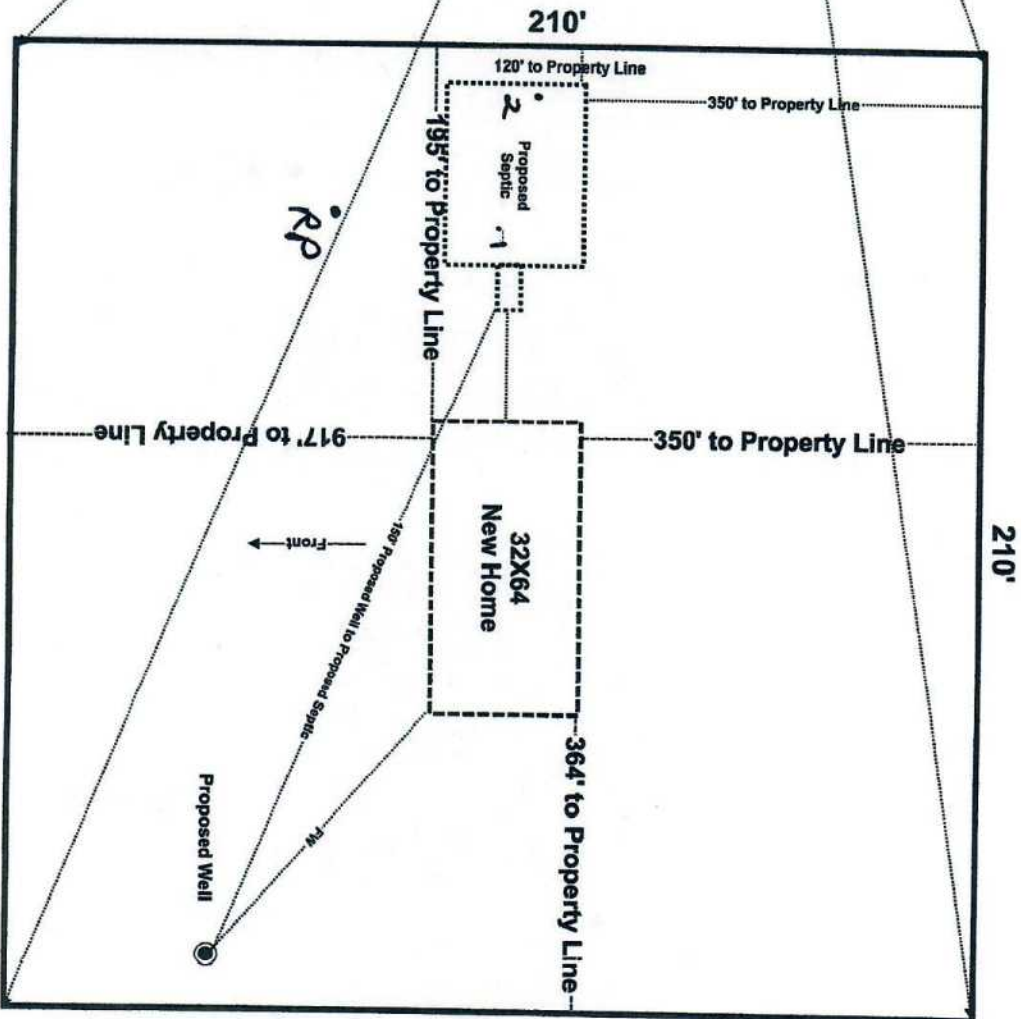
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used;  
incorporated: 62-8.004, F A C



Notes:

1. This is a 1 acre to scale section of a 20.2 acre parcel.
2. Driveway access on SW Bayberry Glen

Justin Steedley  
TBD SW Bayberry Glen Ft White  
Parcel: 12-6S-16-03816-403



Scale 1" = 40'  
Tustenugee Trace  
Lots 3-4

*Handwritten signature*  
25.2064  
5.27.26

26-2458