

SSD 181 502942



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

PERMIT NO. 25-0534
DATE PAID: 6/20/25
FEE PAID: 425.00
RECEIPT #: 2027491

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Martha Newbern EMAIL: _____

AGENT: _____ TELEPHONE: 386-752-0097

MAILING ADDRESS: 361 NW Sunset Hill Ct. Lake City, FL 32055

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 #: 25-35-15
00213-002 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 10.7 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] ☐ ≤2000GPD [] ☐ >2000GPD

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

PROPERTY ADDRESS: 355 SW Mayo Rd. Lake City, FL 32024

DIRECTIONS TO PROPERTY: Turn left onto Mayo Rd. off 90 W. Turn right at 1st driveway when Mayo Rd. curves to left.

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>Mobile home</u>	<u>3</u>	<u>1493</u>	
2				
3				
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Martha Newbern DATE: 6/25/25



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

Email: martha.newbern@yahoo.com
7-10-25

PERMIT #: **12-SC-3152926**

APPLICATION #: **AP2227491**

DATE PAID: _____

FEE PAID: _____

RECEIPT #: _____

DOCUMENT #: **PR2292544**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: MARTHA**25-0534 NEWBERN

PROPERTY ADDRESS: 355 SW MAYO Rd Lake City, FL 32024

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 00213-002

[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 [900] 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 [375] 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 in tree w/ pink ribbon E of site

I ELEVATION OF PROPOSED SYSTEM SITE [14.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [44.00] [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

E

R

SPECIFICATIONS BY: Sean P Havens

TITLE: Environmental Specialist I

APPROVED BY: Sean P Havens

TITLE: Environmental Specialist I

Columbia CHD

DATE ISSUED: 07/07/2025

EXPIRATION DATE: 01/07/2027

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

KYL

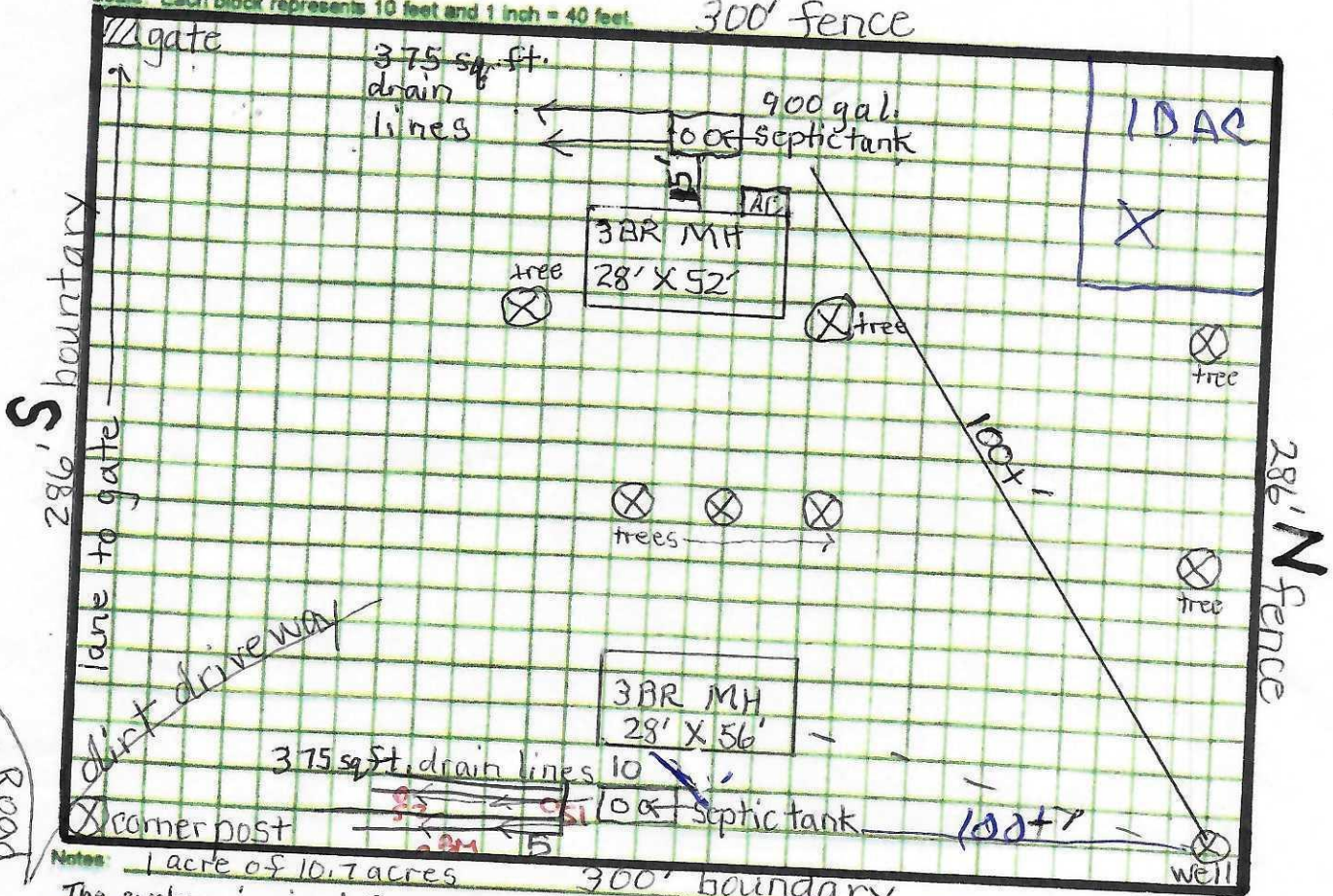
STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 25-0534

PART II - SITEPLAN

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

300' fence



Notes: 1 acre of 10.7 acres

The system is sized for 3BR with maximum occupancy of 6 persons.

Site Plan submitted by: Marta Newbern

Plan Approved ☒

Not Approved ☐

By [Signature]

Columbia

Date 7/7/25

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: 62-6.004, F.A.C.



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATION

APPLICATION # AP2227491
PERMIT # 12-SC-3152926
DOCUMENT # SE2193185

APPLICANT: MARTHA**25-0534 NEWBERN

CONTRACTOR / AGENT: _____

LOT: _____

BLOCK: _____

SUBDIVISION: _____ ID#: 00213-002

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: ☒ YES ☐ NO NET USABLE AREA AVAILABLE: 10.70 ACRES
TOTAL ESTIMATED SEWAGE FLOW: 300 GALLONS PER DAY [RESIDENCES-TABLE1 / OTHER-TABLE 2]
AUTHORIZED SEWAGE FLOW: 16050.00 GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
UNOBSTRUCTED AREA AVAILABLE: 2000.00 SQFT UNOBSTRUCTED AREA REQUIRED: 563.00 SQFT

BENCHMARK/REFERENCE POINT LOCATION: Nail in tree w/ pink ribbon E of site
ELEVATION OF PROPOSED SYSTEM SITE 14.00 [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES
SURFACE WATER: _____ FT DITCHES/SWALES: _____ FT NORMALLY WET: ☐ YES ☒ NO
WELLS: PUBLIC: _____ FT LIMITED USE: _____ FT PRIVATE: 100 FT NON-POTABLE: _____ FT
BUILDING FOUNDATIONS: 10 FT PROPERTY LINES: 5 FT POTABLE WATER LINES: 40 FT

SITE SUBJECT TO FREQUENT FLOODING? ☐ YES ☒ NO 10 YEAR FLOODING? ☐ YES ☒ NO
10 YEAR FLOOD ELEVATION FOR SITE: _____ FT [MSL / NGVD] SITE ELEVATION: _____ FT [MSL / NGVD]

SOIL PROFILE INFORMATION SITE 1

USDA SOIL SERIES: BlantonLoamy

Munsell #/Color	Texture	Depth
10YR 4/2	Fine Sand	0 To 10
10YR 5/3	Fine Sand	10 To 32
10YR 6/3	Fine Sand	32 To 72

SOIL PROFILE INFORMATION SITE 2

USDA SOIL SERIES: BlantonLoamy

Munsell #/Color	Texture	Depth
10YR 4/2	Fine Sand	0 To 12
10YR 5/3	Fine Sand	12 To 35
10YR 6/3	Fine Sand	35 To 72

OBSERVED WATER TABLE: 72.00 INCHES [ABOVE / BELOW] EXISTING GRADE TYPE: [PERCHED / APPARENT]
ESTIMATED WET SEASON WATER TABLE ELEVATION: 72 INCHES [ABOVE / BELOW] EXISTING GRADE
HIGH WATER TABLE VEGETATION: ☐ YES ☒ NO MOTTLING: ☐ YES ☒ NO DEPTH: _____ INCHES
SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: Fine Sand/0.80 DEPTH OF EXCAVATION: _____ INCHES
DRAINFIELD CONFIGURATION: ☒ TRENCH ☐ BED ☐ OTHER (SPECIFY) _____

REMARKS/ADDITIONAL CRITERIA

S1 14" BBM S2 16" BBM

SITE EVALUATED BY: _____

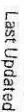
Havens, Sean (Title: Environmental Specialist I) (Florida Department of Health in Colum

DATE: 07/02/2025

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

Page 3 of 4

1,493 SQ. FT. (Approximate) 3 Bedrooms, 2 Baths



Overall Dimensions: 56' x 72'80"

Rooms and Dimensions:

- Bedroom #2:** 11'-6" x 12'-9"
- Bedroom #3:** 11'-2" x 12'-9"
- Living:** 23'-8" x 12'-9"
- Dining:** 10'-0" x 12'-9"
- Kitchen:** 10'-0" x 12'-9"
- Master Bedroom:** 15'-6" x 12'-9"
- Bath #2:** 30" x 60" Tub
- M. Bath:** 36" x 60" Shower

Other Features:

- WIC (Walk-In Closet):** Located in Bedroom #2, Bedroom #3, and Master Bedroom.
- Living Area:** Includes a fireplace and a large window.
- Kitchen:** Includes a stove, sink, and refrigerator.
- Utility:** Includes a washer/dryer area (WB+SD) and a utility closet (RAG).
- Bathrooms:** Includes a bathtub in Bath #2 and a shower in M. Bath.
- Entrances:** Main entrance (3661E) and a side entrance (3661E).
- Storage:** Includes a closet (3080) and a linen closet (3080).



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any time without prior notice or obligation. Pictures and other promotional materials are representative and may depict specially light fixtures, custom paint and wall coverings, upgrades, extra design features, decorations, floor coverings, furnishings, appliances, and other designer/decorator features and amenities that are not included as part of the home to prior sale, at any time without notice or obligation. ©2021 Champion Homes. All rights reserved.

MANUFACTURED BY:



I authorize Champion Homes Center to build my house, per this plan

X

Customer Signature/Date _____

Mission:

To protect, promote & improve the health
of all people in Florida through integrated
state, county & community efforts.



Vision: To be the Healthiest State in the Nation

Ron DeSantis

Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

TO: **COLUMBIA COUNTY HEALTH DEPARTMENT**
Environmental Health
Phone 386-758-1058 Fax 386-758-2187

FROM:

PERMIT: #

Handwritten: Rowden
25-0584

As **owner** or **authorized agent** for the property described in the above referenced permit, I certify that I am fully aware of the following:

1. I am aware of the **zoning** requirements for this property, and I have determined from the **County Planning & Zoning office** that I can develop the property as described in my septic tank permit application.
2. I understand that it is **my responsibility** to determine if my property and proposed development lies within a **flood** prone area. (The County Planning & Zoning office can provide this information)

SIGNATURE: *Martha Newbern* DATE: *6-25-25*

☒ OWNER AUTHORIZED AGENT ☐

**Florida Department of Health
in Columbia County**
217 NE Franklin Street
Lake City, FL 32055
PHONE: 386/758-1058 • FAX: 386/758-2180
FloridaHealth.gov



Accredited Health Department
Public Health Accreditation Board

W1/2 OF SW1/4 OF NE1/4 LYING SOUTHWEST CORNER OF SECTION 36, T1N, R1E, S1/4 NE1/4

NEWBORN MARTHA DYKES
361 NW SUNSET HILL CT
LAKE CITY, FL 32055

2025

25-3S-15-00213-002

BUILDING CHARACTERISTICS

ELEMENT	CD	CONSTRUCTION
Roof Structure	05	AVANCE 100
Roof Cover	14	PREFIN MP 100
Interior Wall	01	MINIMUM 100
Interior Floor	14	CARPET 90
Exterior Floor	08	SHT VINYL 10
Condition	03	CENTRAL 100
Roofing Type	04	AIR DUCTED 100
Bedrooms	3	100
Bathrooms	2	100
Stories	1	1. 100
Architectural	01	CONV 100
Units	0	100
Kitchen Adjus	01	01 100

MARKET ADJUSTMENTS

TYPE	AREA	PRICE	ADJ	AVG	EXE	ECON	FNCT	NORM	% COND
0800	02	1,478	24,9050	56.94	84,157	1985	1985	0	40.00
Heated Area: 1452									
HIX Base Yr									

COLUMBIA COUNTY PROPERTY VALUATION SUMMARY

VALUATION BY	Tax Group: 3	Tax Dist:	STANDARD
BUILDING MARKET VALUE			33,663
TOTAL MARKET OBJX VALUE			8,200
TOTAL LAND VALUE - MARKET			96,300
TOTAL MARKET VALUE			53,579
ASSESSD VALUE			13,262
TOTAL EXEMPTION VALUE			40,317
BASE TAXABLE VALUE			0
TOTAL JUST VALUE			40,317
INCOME VALUE			138,163
PREVIOUS YEAR MKT VALUE			110,103

Quality 04 04

DOR CODE 5000 IMPROVED AG

MAP NUM MKT AREA 01

NEIGHBORHOOD/LOC 25315.00 1.00/

AREA TOTAL PCT YEAR TOT ADJ SUBAREA

TYPE GROSS OF BASE AREA MARKET VALUE

BAS 1,452 100 1,452 33,071

UOP 104 25 26 592

TOTALS 1,556 1,478 33,663

EXTRA FEATURES

OBX/FEAT	DESCRIPTION	BLD CAP	L	W	UNITS	UT	ADJR	ADJ UNIT PRICE	ORIG COND	YEAR ON	YEAR ACTUAL	Q	% COND	OBX/FEAT VALUE	NOTES
1 0190	EPIC PF	0	0	0	1.00	UT 1,200.00		1,200.00	100	2008	2008	3	100	1,200	
2 9945	Well/Sept	0	0	0	1.00	UT 7,000.00		7,000.00	100			3	100	7,000	

BUILDING NOTES

BAS- W52 S28 E12 UOF- S10 E10 N10 W3 N1 W4 S1 W3 E3 N1 E4 S1 E3 N28S.

BUILDING DIMENSIONS

SALES DATA

OFF RECORD Number	DATE	TYPE	Q	V	RSN	SALE PRICE
		U	U	I	CD	

LAND DESCRIPTION

USE		CLS	LAND USE DESCRIPTION	CAP	R	D	LOG ZONE	FRONT	DEPTH	8,200														
CODE										TOT LMD UTS	UNIT TYPE	DPTH	% COND	TOT ADJ	UNIT PRICE	ADJ UNIT PRICE	LAND VALUE	OTHER ADJUSTMENTS AND NOTES	YEAR	DENSITY	DECL	FRZ	YR CONSRV	
1 0200		C	MBL HM	0			00	0.00	0.00	1.00 AC	1.00	1.00	1.00			9,000.00	9,000.00	9,000						
2 6200		A	PASTURE 3	0			A-1	0.00	0.00	9.70 AC	1.00	1.00	1.00			280.00	280.00	2,716						
3 9910		M	MKT. VAL. AG	0			A-1	0.00	0.00	9.70 AC	1.00	1.00	1.00			9,000.00	9,000.00	87,300						

TOTAL OBX/FEAT

8,200

REVIEW DATE 05/11/2016 BY DF

Total Acres: 10.70

Total Land Value: 11,716

Market: 87,300

Agricultural: 2,716

Common: 9,000

PRINTED 06/25/2025 BY SYS



Columbia County Health Department
217 NE Franklin St Lake City, FL 32055

PAYING ON: # 12-SC-3152926 BILL DOC #: 12-BID-7985967 CONSTRUCTION APPLICATION #: AP2227491
RECEIVED FROM: MARTHA**25-0534 NEWBERN AMOUNT PAID: \$ 425.00
PAYMENT FORM: CHECK 1074 PAYMENT DATE: 06/30/2025
MAIL TO: MARTHA**25-0534 NEWBERN
SUNSET
Lake City, FL 32024

FACILITY NAME : _____
PROPERTY LOCATION:

MARTHA NEWBERN 25-0534
355 SW MAYO Rd
Lake City, FL 32024

Lot: _____ Block: _____

Property ID: 00213-002

EXPLANATION or DESCRIPTION:	QUANTITY	FEE
128 - OSTDS Construction System Inspection Research Fee	1	\$ 5.00
-1 - COUNTY FEE 1 (OSTDS)	1	\$ 25.00
-1 - OSTDS Construction Application and Plan Review, New	1	\$ 100.00
123 - OSTDS Construction Site Evaluation	1	\$ 115.00
126 - OSTDS Construction Permit (New or Mod, Amendment)	1	\$ 55.00
127 - OSTDS Construction System Inspection	1	\$ 75.00
133 - OSTDS Construction Reinspection	1	\$ 50.00

RECEIVED BY: MobleySJ
Note: NEWBERN /25-0534

AUDIT CONTROL NO. 12-PID-7479889

442

25-0534

Affected Service Areas

Priority: Normal Start Time: 07/02/2025 11:59 PM Remarks: SEPTIC

Due: 07/02/2025 11:59 PM
Expires: 07/30/2025 11:59 PM

Service Areas:

Ex. Circum	Service Area	Utility Type(s)	Contact	Excavator Comments
<u>More</u> Yes	AT & T/ DISTRIBUTION SBF09	TELEPHONE	DINO FARRUGGIO (561) 683-2729	
<u>More</u> No	AT T ATTF01	COMMUNICATION LINES, FIBER	THE NATIONAL DISPATCH CENTER (800) 252-1133	
<u>More</u> No	FLORIDA POWER & LIGHT--COLUMBIA FPLCLM	ELECTRIC	USIC DISPATCH CENTER (800) 778-9140	
<u>More</u> No	MCI MCTU01	COMMUNICATION LINES, FIBER	FIELD CONTACTS (800) 624-9675	

 Back to Ticket

 Send Ticket