



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

PERMIT NO. 25-03606
DATE PAID: 4/1/25
FEE PAID: 185.00
RECEIPT #: 2506517

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[X] Repair [] Abandonment [] Temporary []

APPLICANT: Melinda Campbell EMAIL: _____

AGENT: K. Keen TELEPHONE: 352-356-7220

MAILING ADDRESS: 768 NE 143 Ave 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 / (N)]

LOT: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 11-25-16-0593-112 ZONING: _____ I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: 4.73 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 562 NW Bison Ct. White Springs Fl 32096

DIRECTIONS TO PROPERTY: US-41 N, (R) NW Falling Creek Rd, (S) NW Lacie black sq, (R) NW Bison Ct.

BUILDING INFORMATION

[X] 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	4	2133	
2	SFR-MH	2	672	Replacing this SFR
3				
4				

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

SIGNATURE: K. Keen 23-2940 DATE: 4/1/25



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

PERMIT #: **12-SC-3104295**
APPLICATION #: **AP2206517**
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____
DOCUMENT #: **PR2241634**

CONSTRUCTION PERMIT FOR: OSTDS Repair

APPLICANT: MELINDA**25-0366 CAMPBELL

PROPERTY ADDRESS: 562 NW BISON White Springs, FL 32096

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 01593-112

[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 [900] GALLONS / GPD Existing septic tank CAPACITY
A [0] GALLONS / GPD _____ CAPACITY
N [0] 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 [0] SQUARE FEET _____ SYSTEM

A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []

I CONFIGURATION: [X] TRENCH [] BED []

N
F LOCATION OF BENCHMARK: Nail with pink ribbon in pine NE of site

I ELEVATION OF PROPOSED SYSTEM SITE [29.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [47.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

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

O 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.

T CHD recommends 500sqft due to adding a 4 bedroom home, up from a 2 bedroom.

H Required drainfield area based on Rule 62-6.015(6)(c)2., F.A.C.

E Install a new drainfield to achieve Drainfield size requirement.

R

SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP

APPROVED BY: Kyle B Roberts TITLE: Environmental Manager Columbia CHD

DATE ISSUED: 04/24/2025

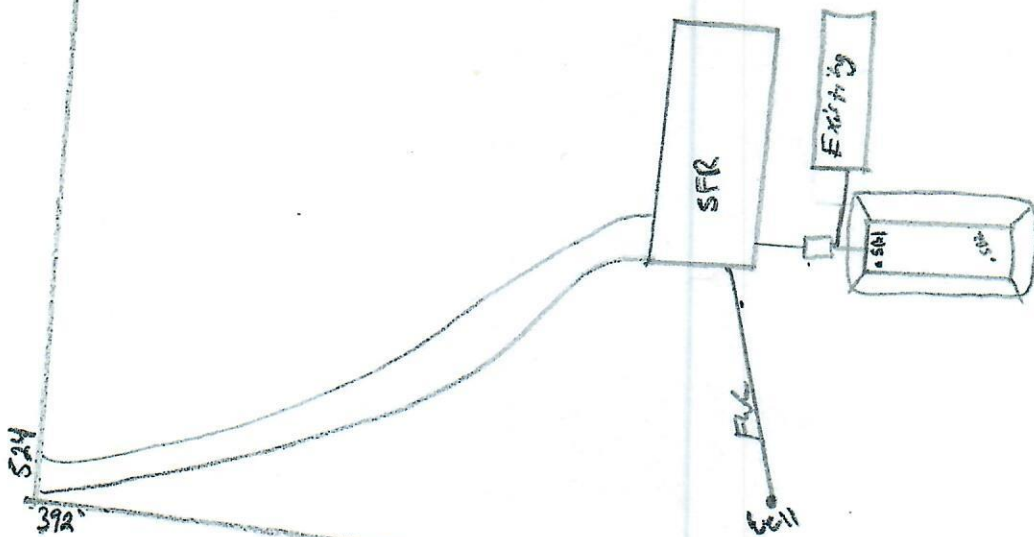
EXPIRATION DATE: 07/23/2025

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

H. Keen
23-2940
4-1-25

25-0364

—N—→



Melinda Campbell
562 NW Bison Ct.
White Springs FL 32096

Scale 1" = 60'

 Columbia