



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

PERMIT NO. 25-0171
DATE PAID: 2/25/25
FEE PAID: 600.00
RECEIPT #: 2195188

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: THOMAS R. REILAND

EMAIL: trr_2000@yahoo.com

AGENT:

TELEPHONE: 386-983-4828

MAILING ADDRESS: 469 SW. MAPLETON ST. FORT WHITE, FL 32038

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: 80 BLOCK: _____ SUBDIVISION: SANTA FE RIVER PLANTATIONS PLATTED: 5/13

PROPERTY ID #: 30-75-17-10058-670 ZONING: AG I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 1.472 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N

DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 469 SW MAPLETON ST. FORT WHITE, FL 32038

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 WORKSHOP WITH LEAN-TO 600 24x25

2 LEAN-TO 300 12x25

3 _____

4 _____

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: TRR

DATE: 2-25-25

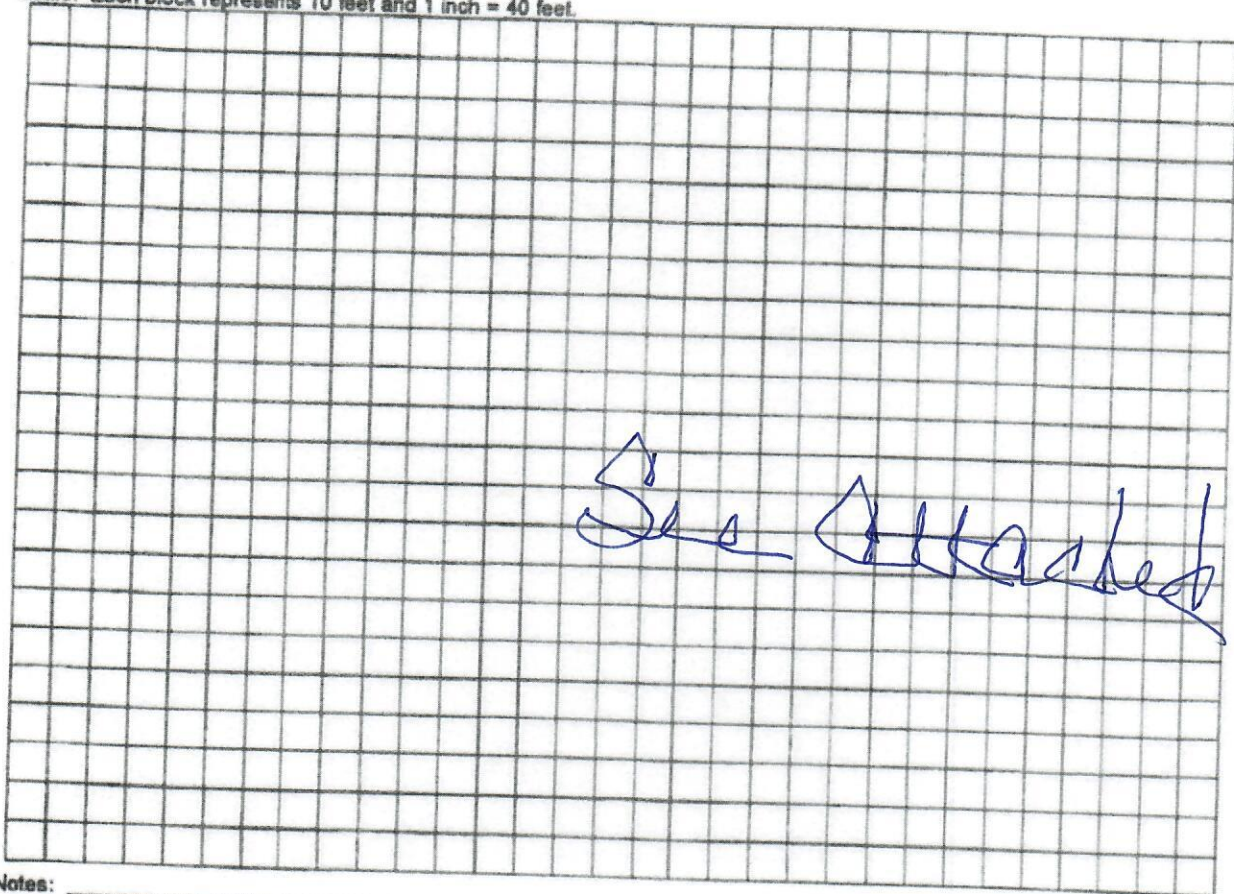
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PART II - SITEPLAN

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



Notes:

Site Plan submitted by:

Plan Approved

Not Approved

Date

3/3/15

By

Columbia 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.

