STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	140	Permit Application No	umber 33-08
************		SITEPLAN - VOVIS	5/Lev
324.08		-200	· ·
		1000	36'
	50	3/15/M/Stope	1 25'
	and it	" A ST	
	72'		800
horth 8	21) W/L 180	18 HIL Home	210
		Hour	
673			
	11	worth	
11/11	[3]		
14,	12	. V	
18324.08		210'	4
		TAC	of SAC
Notes:	7 3 5		
	A Company of the second		
Site Plan submitted by:		10-17-2022	MASTER CONTRACTOR
Plan Approved X	Not Appro		Date
riail Approved			

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FA((Stock Number: 5744-002-4015-6)

Page 2 of 4



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

DATE PAID: FEE PAID: RECEIPT #:

Page 1 of 4

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:	
[] New System [] Existing System [] Abandonment	[] Holding Tank [] Innovative [] Temporary []
APPLICANT: WOWD DAVICE	EMAIL: OF SEPTICION HOCOM CONTROL CV
AGENT: ROBERT FOR 111-North Florida Septic	Tank INC TELEPHONE : 386-755-637
MAILING ADDRESS: MAI SE State Road 10	10, Lake City, F1.32025
	J
TO BE COMPLETED BY APPLICANT OR APPLICANT'S ABY A PERSON LICENSED PURSUANT TO 489.105(3) (mapplicant's responsibility to provide document platted (mm/dd/yy) if requesting consideration	a) OR 489.552, FLORIDA STATUTES. IT IS THE TATION OF THE DATE THE LOT WAS CREATED OR
PROPERTY INFORMATION	OSTDS REMEDIATION PLAN? [Y / N]
LOT: MBLOCK: Ph3 SUBDIVISION: SCC	gefield PLATTED:
PROPERTY ID #:03-6516-03067-307 201	NING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: ACRES WATER SUPPLY: [X]	PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /	M] DISTANCE TO SEWER: FT
PROPERTY ADDRESS: 322511 ROllif	ng Meadows Gin, FW
DIRECTIONS TO PROPERTY:	~
BUILDING INFORMATION [X RESIDENTIA	L [] COMMERCIAL
1011 10000 7	Sqft Table I, Chapter 62-6, FAC
2	
3	
4	
[] Floor/Equipment Drains [] Other (Sp	ecify)
SIGNATURE: KOBENT FORDUU	DATE: 10-17-2022
DEP 4015, 06-21-2022 (Obsoletes previous editi	ons which may not be used)
Incorporated 62-6.004, FAC	Page 1 of 4



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM PERMIT #: 12-SC-2596666

APPLICATION #: AP1906048

DATE PAID: 10 17 12

FEE PAID: 310- 00

RECEIPT #:____

DOCUMENT #: PR1862964

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: THOMAS**22-0861 DAVID	
PROPERTY ADDRESS: 322 SW ROLLING MEADOWS Fort White, FL 32038	
LOT: 7 BLOCK: SUBDIVISION: SEDGEFIELD PH-3	,
PROPERTY ID #: 03767-307 [SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	CEL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDAR 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.	S NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS	72
T [900] GALLONS / GPD	#Pumps []
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimate 300 gpd. THE	d flow of
R	
SPECIFICATIONS BY: Robert W Ford TITLE:	
APPROVED BY: TITLE: Environmental Specialist II	Columbia CHD
DATE ISSUED: 10/19/2022 EXPIRATION DATE:	04/19/2024
DH 4016 08/09 (Obsoletes all previous editions which may not be used) Incorporated: 64E 6.003, FAC	Page 1 of 3