



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

CR # 24-00322

PERMIT NO. _____
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: The Woods Project

EMAIL: thumphries@nfps.net

AGENT: NORTH FLORIDA PROFESSIONAL SERVICES INC.

TELEPHONE: (386) 752-4675

MAILING ADDRESS: PO BOX 3823

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: N/A BLOCK: N/A SUBDIVISION: METES AND BOUNDS PLATTED: _____

PROPERTY ID #: 02-4S-16-02719-000 ZONING: COM I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 6.640 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☒ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 149 SW WOOLSEY GLEN, LAKE CITY

DIRECTIONS TO PROPERTY: TAKE US 90 WEST. TURN LEFT ON CR 247. CROSS OVER I-75. 1ST SITE ON LEFT.

BUILDING INFORMATION ☐ RESIDENTIAL ☒ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 62-6, FAC
1	EVENT VENUE	0	460	SEWGAGE FLOW PROVIDED BY COLUMBIA
2				COUNTY HEALTH DEPT.
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: *Thumphries for NFPS*

DATE: 10/7/24



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

PERMIT #: **12-SC-3036303**
APPLICATION #: **AP2166864**
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____
DOCUMENT #: **PR2185362**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: WOODS**24-0827 PROJECT

PROPERTY ADDRESS: 149 SW WOOLSEY Gln Lake City, FL 32024

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 02719-000 [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 [5,800] GALLONS / GPD _____ CAPACITY
A [] GALLONS / GPD _____ CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [3,000] GALLONS DOSING TANK CAPACITY [756.0(] GALLONS @ [6] DOSES PER 24 HRS #Pumps [2]

D [5,672] SQUARE FEET _____ SYSTEM
R [] SQUARE FEET _____ SYSTEM

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

I CONFIGURATION: [x] TRENCH [] BED []

F LOCATION OF BENCHMARK: Nail in pine tree south of system site.

I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [8.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [34.00] INCHES EXCAVATION REQUIRED: [12.00] INCHES

Variance #16938 - Approved 6 drainfields of equal size between 945 and 1000 SF of drainfield.
These drainfields are to be split into 3 and 3 with each being fed by 2 alternating pumps through a distributing valve assembly.
Please find the attached engineer drawings for specifications.
12" excavation required per 62-6 F.A.C.

SPECIFICATIONS BY: Paul Lloyd TITLE: _____

APPROVED BY: Kyle Roberts TITLE: Environmental Manager Columbia CHD

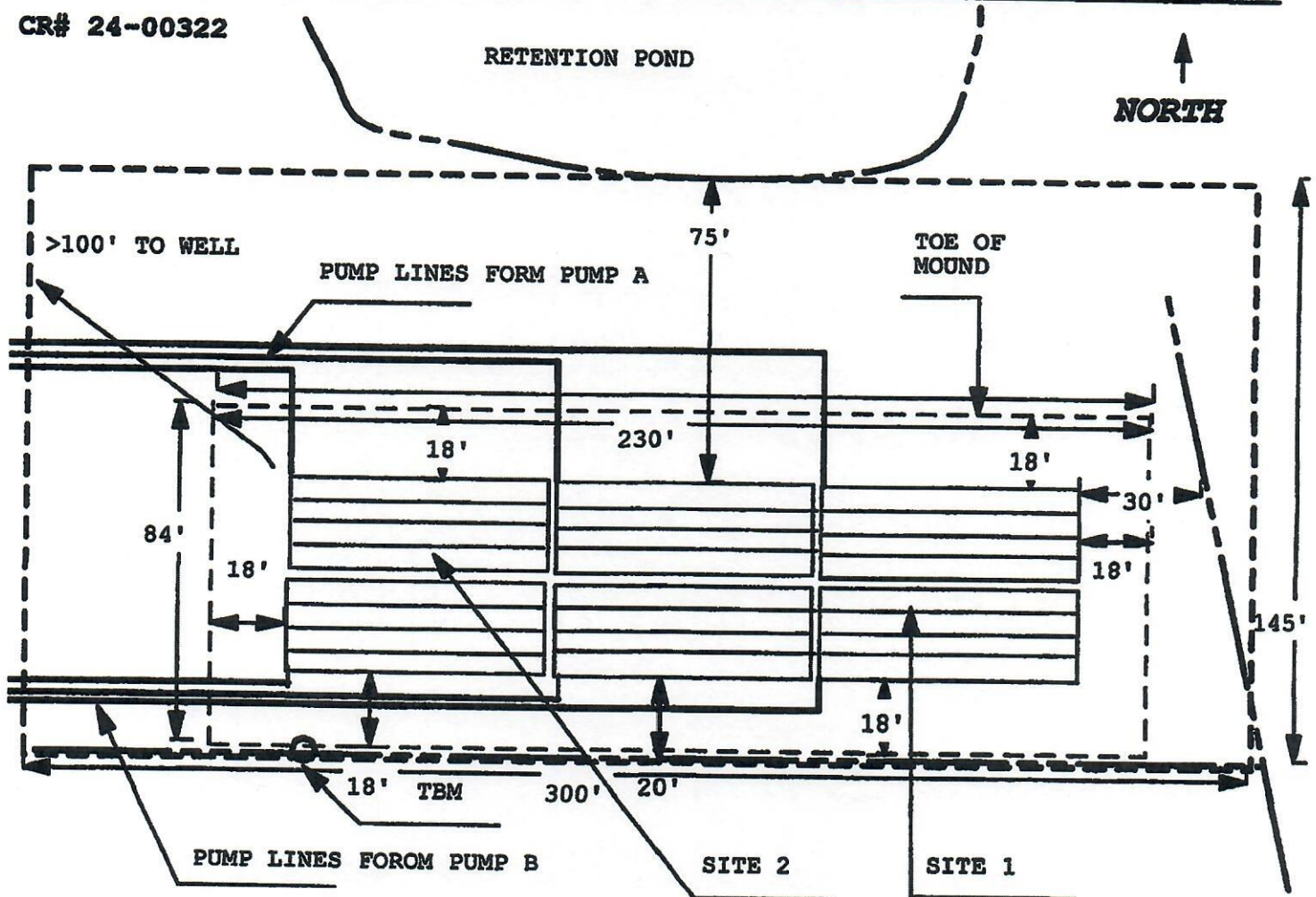
DATE ISSUED: 02/27/2025 EXPIRATION DATE: 05/15/2026

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

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 24-0827

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

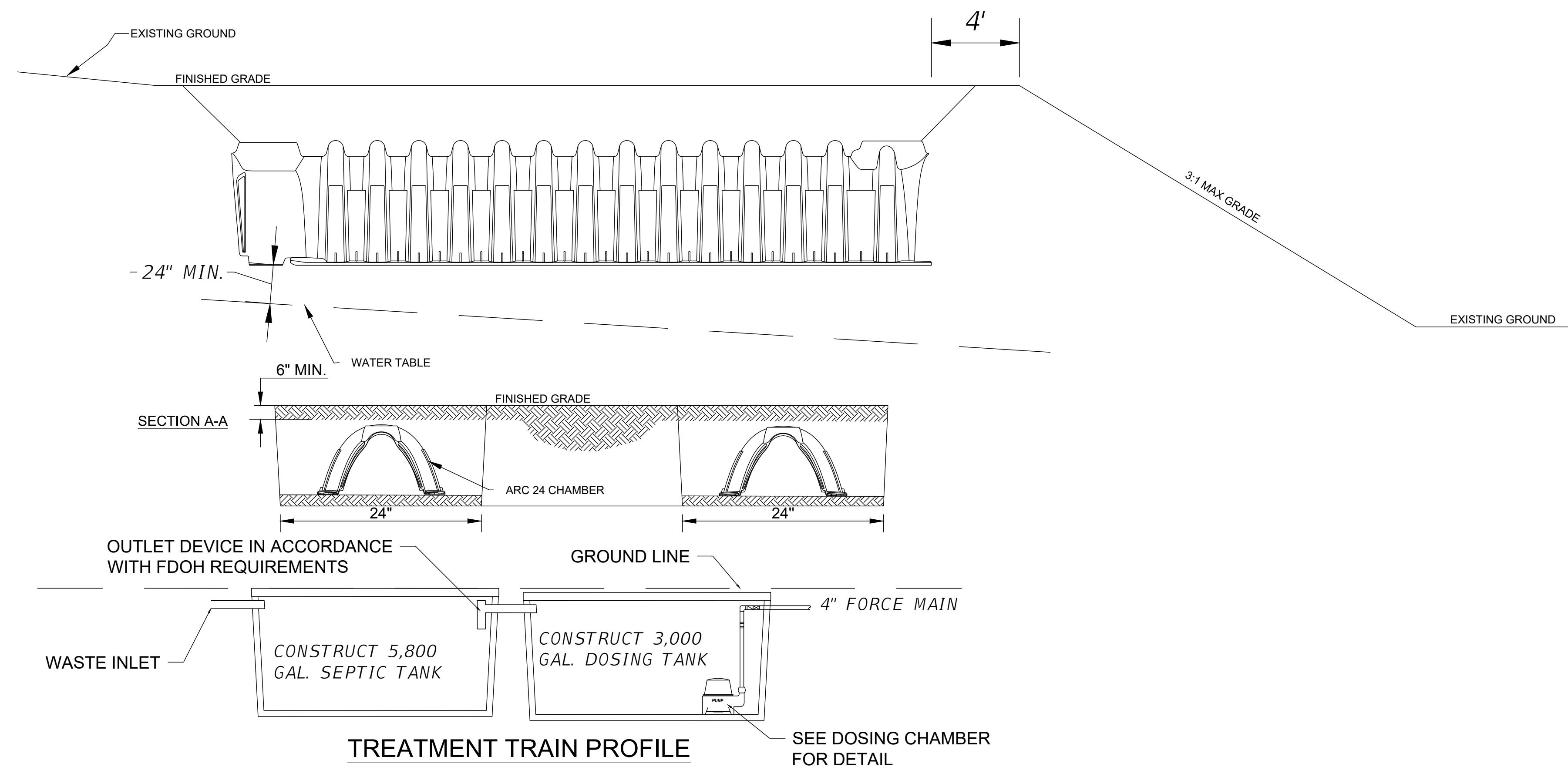
CR# 24-00322



1 INCH = 40 FEET

NO WELLS WITHIN 100'

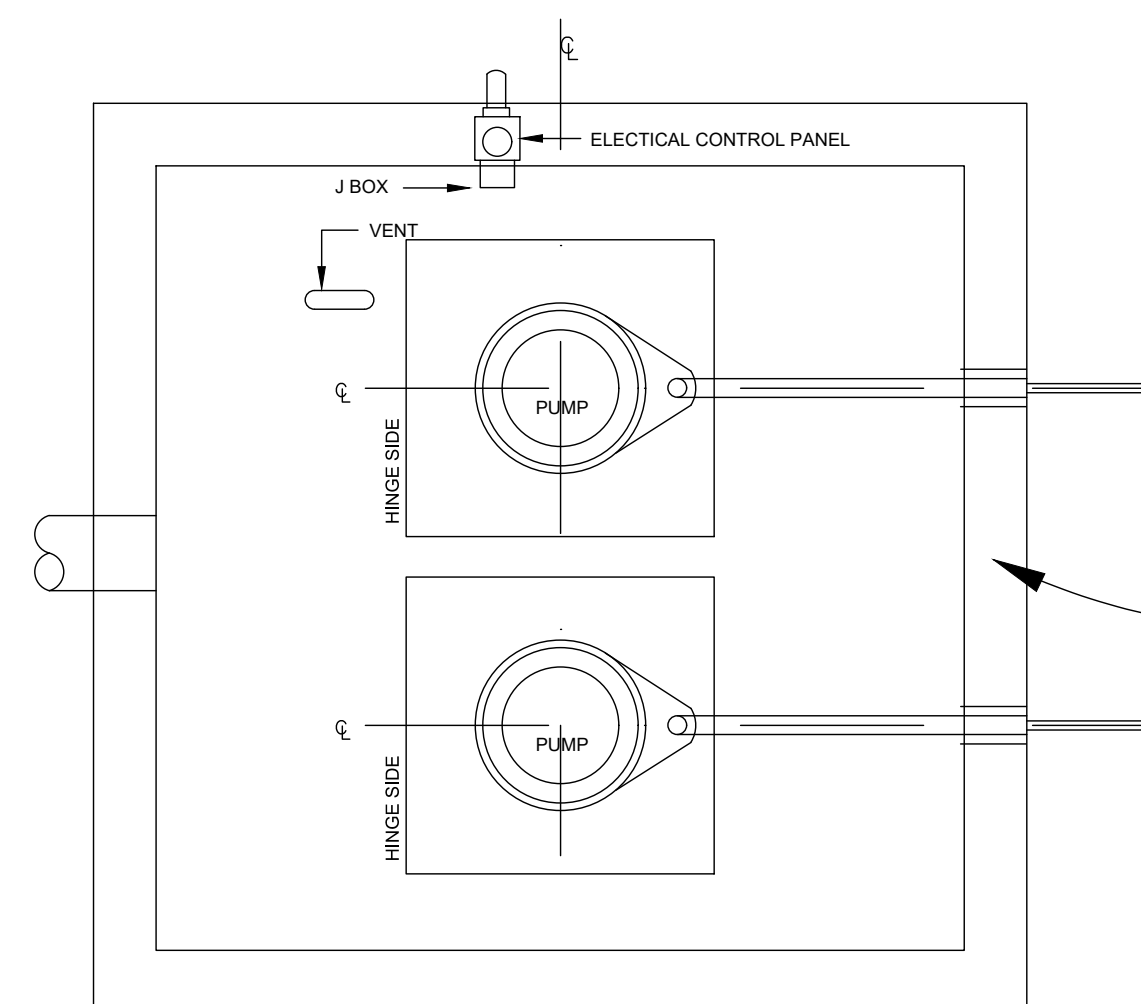
Site Plan Submitted By Paul L. Loh Date 11/6/24
 Plan Approved [Signature] Not Approved Date 2/27/25
[Signature] Columbin CPHU
 Notes: Variance # 16938 See U-1 and S-3 for
Specetres.



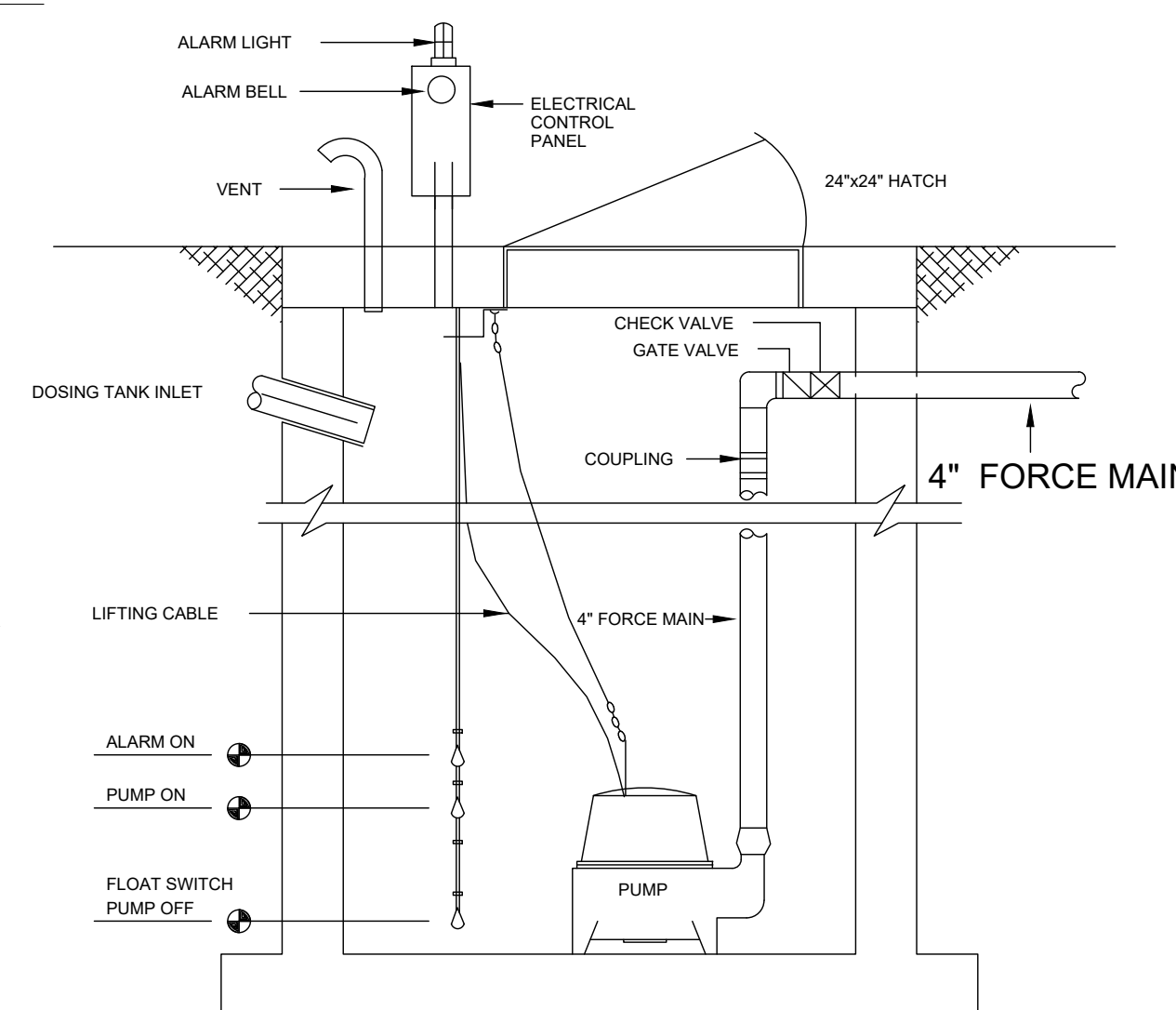
NOTES:

1. ALL SYSTEM COMPONENTS AND CONSTRUCTION SHALL BE IN ACCORDANCE WITH FDEP REQUIREMENTS (CH. 62-6 F.A.C.). AND FDOH SYSTEM PERMIT.
2. CONTRACTOR SHALL COMPLY WITH ALL LOCAL CODES AND REQUIREMENTS.
3. SEPTIC TANK SHALL BE A DUAL COMPARTMENT TANK OR TWO SINGLE COMPARTMENT TANKS THAT ARE ARRANGED IN SERIES.
4. IF TWO SINGLE COMPARTMENT TANKS ARE USED, THE FIRST TANK SHALL HAVE A MIN. EFFECTIVE CAPACITY OF 2/3 THE TOTAL REQUIRED AND THE SECOND TANK MUST HAVE A MIN. EFFECTIVE CAPACITY OF 1/5 THE TOTAL. TOGETHER THE TOTAL EFFECTIVE CAPACITIES MUST MEET OR EXCEED THE REQUIRED CAPACITY.

**SECTION
DUPLEX DOSING CHAMBER**



TOP VIEW



NOTES:

1. THE PUMPS SHALL BE PLACED IN A SINGLE DOSING TANK W/ A CONTROL PANEL.
2. THE ESTIMATED SEWAGE FLOW IS 4,537 GALLONS PER DAY.
3. THE PUMPS SHALL BE SET TO DOSE ALTERNATELY.
4. ELECTRICAL CONDUIT AND EFFLUENT DOSING SHALL EXIT THE DOSING CHAMBER USING ONE OF THE FOLLOWING OPTIONS:
 - 4.1. THROUGH THE TANK OUTLET USING PLUMBING FITTINGS OR REDUCERS TO PRODUCE A WATERTIGHT SEAL.
 - 4.2. THROUGH THE RISER ONLY IF THE PENETRATION IS ABOVE THE WET SEASON HIGH WATER TABLE AND A SOIL TIGHT SEAL SURROUNDS THE PENETRATION.
 - 4.3. THROUGH A 2-4 INCH ACCESS PORT INSTALLED IN THE BY THE MANUFACTURER.
5. DOSING TANK HATCH MUST BE WITH IN 8" OF FINISHED GRADE IN ORDER TO ACCESS.
6. ALARM SHALL BE WATER PROOF AND APPROVED FOR OUTDOOR USE BY THE MANUFACTURER.

1 SYSTEM DETAILS
SCALE: N.T.S.

REVISIONS	
DATE	DESCRIPTION



NORTH FLORIDA PROFESSIONAL SERVICES, INC.
 P.O. BOX 3823
 LAKE CITY, FL 32056
 PH. 386-752-4675
 LIC NO. LB8356

2551 BLAIRSTONE PINES DR.
 TALLAHASSEE, FL 32301
 WWW.NFPS.NET
 CA# 29011

JOB NUMBER:
L210802SPA
EOR:
 ROBERT PHILLIP
 BISHOP JR.
P.E. NO.:
 38546

SYSTEM DETAILS
THE WOODS
COLUMBIA COUNTY, FLORIDA

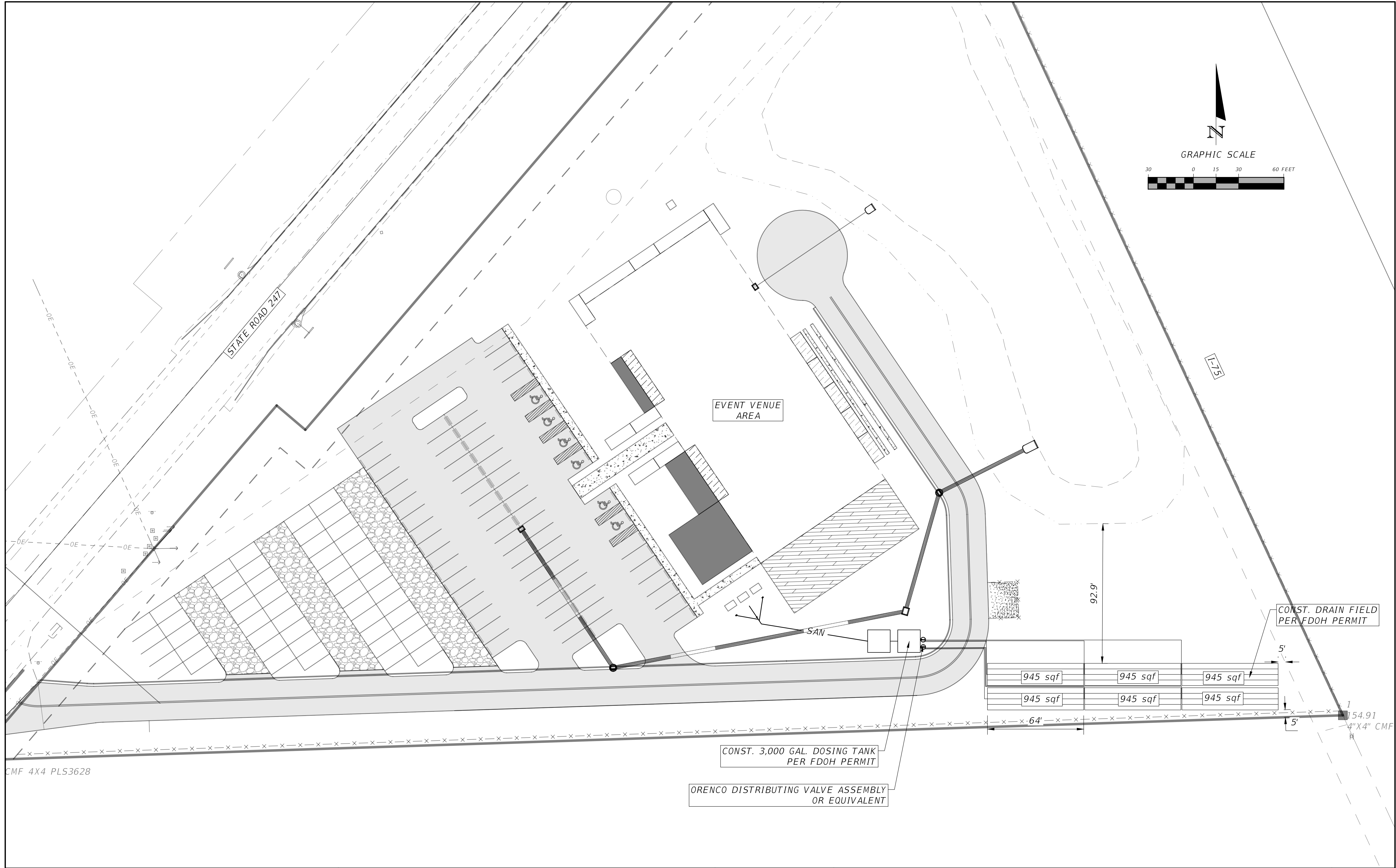
**SHEET
NO.**
S-3

Zulia Cardenas

2/25/2025 11:32:00 AM

X:\2021\L210802SPA\H.CADD\Utils\UTPRUW_CONTAINERPARK_(6 DRAINFIELDS).dwg S-3 SYSTEM DETAILS

THIS ITEM HAS BEEN DIGITALLY SIGNED AND SEALED BY ROBERT PHILLIP BISHOP JR. ON THE DATE ADJACENT TO THE SEAL
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L210802SPA
EOR:
ROBERT PHILLIP
BISHOP JR.
P.E. NO.:
38546

Zulia Cardenas

2/25/2025 11:31:03 AM

UTILITY PLAN
THE WOODS
COLUMBIA COUNTY, FLORIDA

SHEET NO.

U-1

CMF 4X4 PLS3628

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