

E-mail to (purecountryseptic@yahoo.com)

Souls Done



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

PERMIT NO. 25-0410
DATE PAID: 2/8/25
FEE PAID: 310.80
RECEIPT #: 22,8974

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Daniel & Brooke Gainey

EMAIL purecountryseptic@yahoo.com

AGENT: Ronnie Moore

TELEPHONE: 352-246-3997

MAILING ADDRESS: PO Box 158 FT 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: N/A BLOCK: N/A SUBDIVISION: N/A PLATTED: 2003

PROPERTY ID #: 23-7S-16-04298-021 ZONING: SF I/M OR EQUIVALENT: [Y / (N)]

PROPERTY SIZE: 10.02 ACRES WATER SUPPLY: [☒] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / (N)]

DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 3181 SW CR 138 FT White FL 32038

DIRECTIONS TO PROPERTY: 47 south to CR 138 turn left to # 3181 on 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>single family</u>	<u>4</u>	<u>3213</u>	
2				
3				
4				

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

SIGNATURE: Ronnie Moore

DATE: 05/05/25

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

Incorporated 62-6.004, FAC

By  Columbia County Health Department