

STATE OF FLORIDA DEPARTMENT OF HEALTH

PERMIT #: 12-SC-3138471

APPLICATION #: AP2219012

DATE PAID:

ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

RECEIPT #:___

	DOCUMENT #: PR2264257
CONSTRUCTION PERMIT FOR: OSTDS New	en augustum ayab (1 Syano-vinaya makka mankagari ang proposal attsormorras 2 0006 ay manga
APPLICANT: MARTIN**25-0418 CUPP	THE PROPERTY OF THE PROPERTY O
PROPERTY ADDRESS: SW HERITAGE Lake City, FL 32024	The state of the s
ETT & ETTATE OF THE PARTY OF TH	A CONTRACTOR OF THE CONTRACTOR
LOT: BLOCK: SUBDIVISION	N:
PROPERTY ID #: 09475-110	[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER] [OR TAX ID NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WI 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEP SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIO WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESU ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF	PARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE DD OF TIME. ANY CHANGE IN MATERIAL FACTS, PERMIT, REQUIRE THE APPLICANT TO MODIFY THE ULT IN THIS PERMIT BEING MADE NULL AND VOID. APPLICANT FROM COMPLIANCE WITH OTHER PERSON
SYSTEM DESIGN AND SPECIFICATIONS	
T [900] GALLONS / GPD New Multi-Chambered Sept A [] GALLONS / GPD N/A	tic CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAX	KIMUM CAPACITY SINGLE TANK: 1250 CALLONS!
K [] GALLONS DOSING TANK CAPACITY []	GALLONS @[]DOSES PER 24 HRS #Pumps []
D [375] SQUARE FEET Drainfield SYSTEM	
R [] SQUARE FEET N/A SYSTEM	M.
A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []
CONFIGURATION: [X] TRENCH [] BED []	
F LOCATION OF BENCHMARK: Nail with pink ribbon in oak near site	
I ELEVATION OF PROPOSED SYSTEM SITE [11.00] [INCH	
E BOTTOM OF DRAINFIELD TO BE [29.00] [INCH	FT] [ABOVE BELOW] BENCHMARK/REFERENCE POINT
D FILL REQUIRED: [0.00] INCHES EXCAVATION R	PEOUTDED. I TWANTS
The system is sized for 3 bedrooms with a maximum occupancy of 6 300 gpd.	persons (2 per bedroom), for a total estimated flow of
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R	
SPECIFICATIONS BY: (Joshua) Kameron Keen	TITLE: CEHP
APPROVED BY: Sean P Havens	onmental Specialist I Columbia CHD
DATE ISSUED: 05/12/2025	EXPIRATION DATE: 11/12/2026
	11/12/2020

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

DATE PAID: FEE PAID: RECEIPT #: 5

APPLICATION FOR CONSTRUCTION PERMIT

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MAILING AI	DDRESS: 474 N	E 628th ST.	Old Town,	FL. 326	80			
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PROPERTY II	0 #: <u>32-55-17</u>	7-09475-111	o zonin	G:	I/M	OR FOIT	TVAT	ENT: [Y/N]
PROPERTY SI	ZZE: 11,59 ACRE	AC MARKS	1 1 1 No. 1000			ON EGO.	TAN	ENT: [Y/W]
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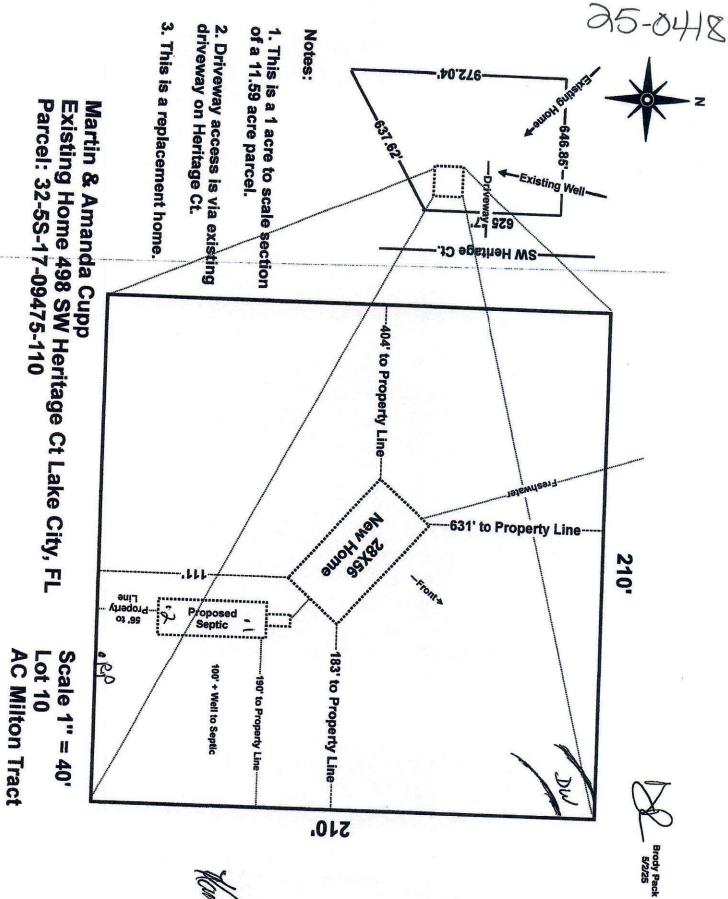
STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION APPLICATION FOR CONSTRUCTION PERMIT

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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 06-21 2022 (Observees previous editions which may not be use a) ncorporated 62-6 004 F A C

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