



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

PERMIT NO. 25-0928  
DATE PAID: 12-3-25  
FEE PAID: \$60  
RECEIPT #: 2079103

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System  Existing System  Holding Tank  Innovative  
 Repair  Abandonment  Temporary

APPLICANT: Robert Hunter

EMAIL: lillian@eliteoutdoorbuildings.com

AGENT: Lillian McDaniel - 386-678-7433

TELEPHONE: 813-442-9758

MAILING ADDRESS: 310 SW Fieldstone ct Lake City, FL 32024

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: 60 BLOCK: \_\_\_\_\_ SUBDIVISION: Emerald Cove PLATTED: \_\_\_\_\_

PROPERTY ID #: 33-35-16-02438-160 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 0.52 ACRES WATER SUPPLY: [ Y ] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 310 SW Fieldstone ct Lake City, FL 32024

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	<u>Detached Accessory</u>	<u>0</u>	<u>608</u>	
2				
3				<input type="checkbox"/>
4				

Floor/Equipment Drains  Other (Specify) \_\_\_\_\_

SIGNATURE: Robert Hunter DATE: 12/1/25

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

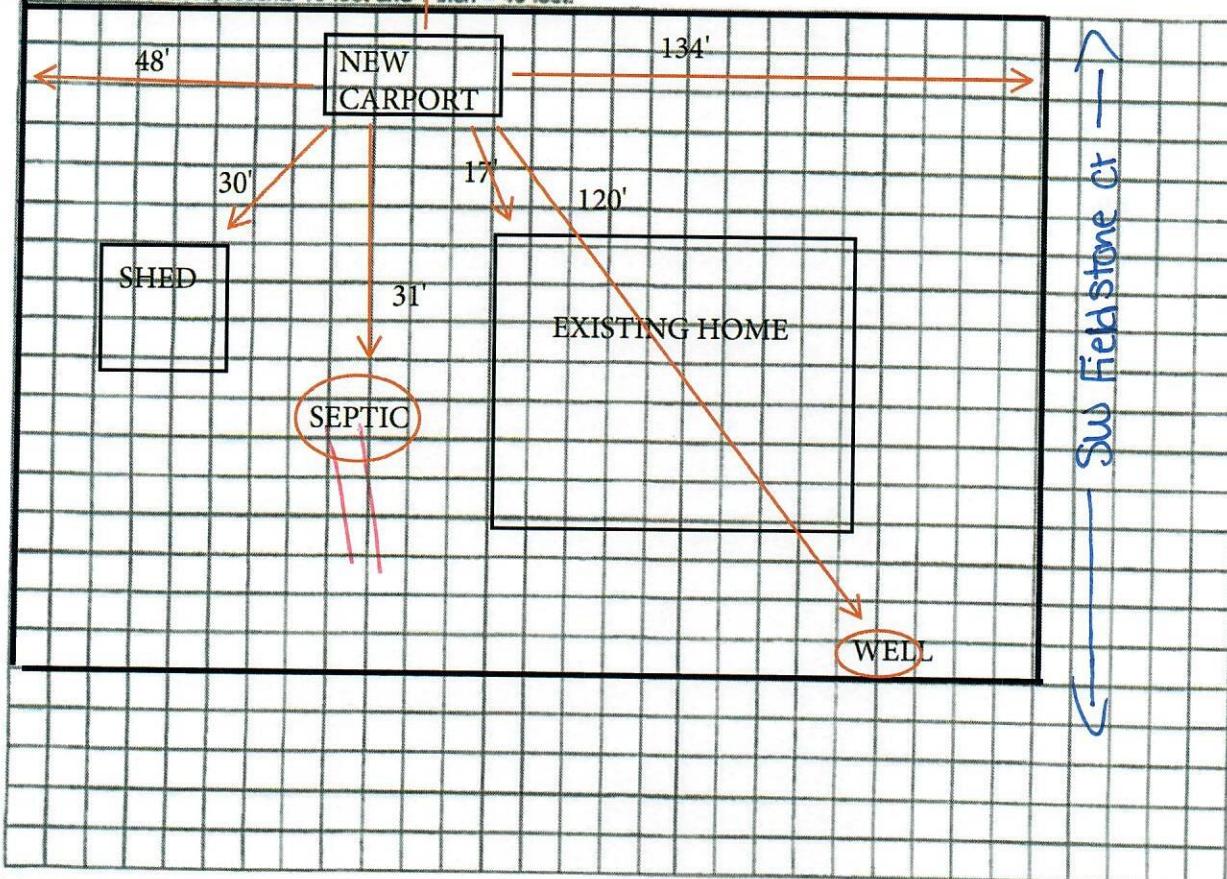


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----- PART II - SITEPLAN -----

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



Notes:

Robert Hunter  
310 Sw Fieldstone Ct

Site Plan submitted by: Lillian McDaniel

Plan Approved ✓  
By Columbia

Not Approved \_\_\_\_\_

Date 12/19/25  
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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Incorporated: 62-6.004, F.A.C.