

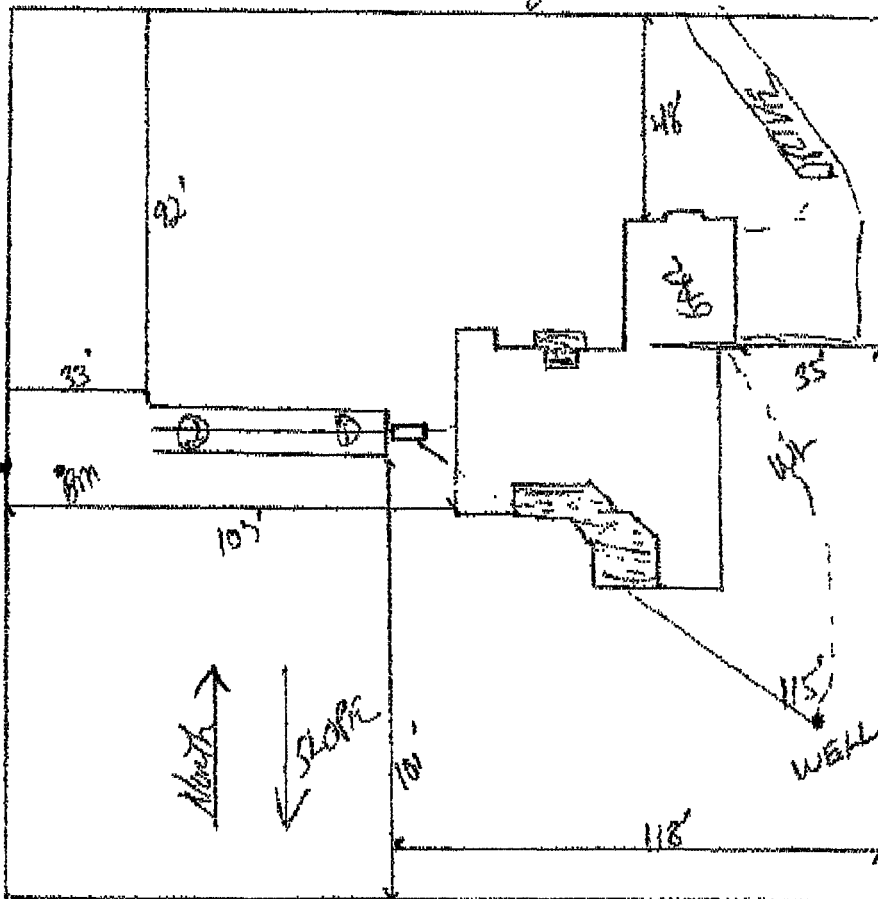
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

13-82601

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes:

1 of 5 Plans SNA ATTACHED

Site Plan submitted by:

Reedy D Z-O

MASTER CONTRACTOR

Plan Approved

Not Approved

Date 5-9-13

By

Saleh Local Env Health Director Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT #: **12-SC-1470726**
APPLICATION #: **AP1106826**
DATE PAID: **5-3-13**
FEE PAID: **310.00**
RECEIPT #: **116626**
DOCUMENT #: **PR905784**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: DALE 13-0261 MOWRY

PROPERTY ADDRESS: 190 SW DUSK Gin Lake City, FL 32024

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: Q3220-089 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0055, 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 [1,050] GALLONS / GPD Septic tank CAPACITY
A [] GALLONS / GPD N/A CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [] GALLONS Dosing TANK CAPACITY [] GALLONS # [] DOSES PER 24 HRS #Pumps []

D [500] SQUARE FEET drainfield SYSTEM
K [] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [x] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [x] TRENCH [] BED []
N

T LOCATION OF BENCHMARK: Nail in pine tree W of system site

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

B BOTTOM OF DRAINFIELD TO BE [54.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O 1. The 911 address shall be required before final approval.
T
N
E
R

SPECIFICATIONS BY: Rocky D Ford

TITLE: MContract

APPROVED BY: Sally A Ford TITLE: Environmental Health Director

Columbia CHD

DATE ISSUED: 05/09/2013

EXPIRATION DATE: 11/09/2014

US 4016, 09/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

Page 1 of 3



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 13-2261
DATE PAID: 5/13/13
FEE PAID: 910.00
RECEIPT #: 1186826

APPLICATION FOR:

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

APPLICANT: Dale & Whitney Mowry

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, 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)(a) 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

LOT: B BLOCK: na SUB: na PLATTED:

PROPERTY ID #: 28-48-16-03220-099 ZONING: I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ $\leq 2000\text{GPD}$ ☐ $> 2000\text{GPD}$

IS SEWER AVAILABLE AS PER 381.0065, RS? ☒ Y ☐ N DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 190 SW Dusk Glen, Lake City, FL, 32024

DIRECTIONS TO PROPERTY: 47 South, TR on CR 240, TL on Ralph Terr, TR on Daytime Lane, TL on Twilight Way, TR on Dusk Glen, 450 feet on left

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SP Residential	3	2516	
2				
3				

☒ Floor/Equipment Drains ☒ Other (Specify)

SIGNATURE: Rocky Ford DATE: 4/17/2013