

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL

PERMIT NO. 24 DATE PAID: FEE PAID: RECEIPT #:

APPLI	CATION FOR CONSTRUCTION PERMIT	· SIUEII
APPLICATION FOR:	CONSTRUCTION PERMIT	411349
L X I NOW Cared		
[] Repair	[] Existing System	
APPLICANT: Scott	Towns Tank	[] Innovative
Scott Scott	Hagan	[]
AGENT: KOMESS I		555-1000 Na 100-100 Na
	leen Emp	AIL:
MAILING ADDRESS. LI	74 NE 628th St. Old Town, FL 3	PHONE: 352-356-133
	T NE 628th of OUT	33d-356- 133
	Ji Old John, Fl. 3	3480
BY A PERSON LICENSED I	PURSUANT OR APPLICANT'S AUTHORIZED ACTION	
APPLICANT'S RESPONSIBI	PLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTI PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA	EMS MUST BE CONSTRUCT
FHATTED (MM/DD/YY) IF	PLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTIPURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA CLITY TO PROVIDE DOCUMENTATION OF THE DATE THE REQUESTING CONSIDERATION OF STATUTORY GRANDFAS	STATUTES. IT IS THE
PRODEROMS	CONSIDERATION OF STATUTORY COMPANY	LOT WAS CREATED OR
PROPERTY INFORMATION	Cacapp. At	HER PROVISIONS.
LOT: BLOOM	OSTDS REME	DIATION PLAN? [Y/6
LOT:BLOCK:	SUBDIVISION:	PLATION PLAMS [Y / 6
DDATING		DT. Amman
PROPERTY ID #: 08-75-1	7-09952-607 ZONING: I/M OR EQ	
	ZONING: I/M OR TO	
PROPERTY SIZE- /O	ES WATER SUPPLY: [K] PRIVATE PUBLIC []<=2 ER 381.0065, FS? [Y / 20]	OLVALENT: [Y / N]
ACR	ES WATER SUPPLY: I A	
TS SPEEDS 3	L (I PRIVATE PUBLIC I	
AVAILABLE AS P	ER 387 00CF	2000GPD [1>2000GPD
	381.0065, FS? [Y/20]	- 1-2000825
PROPERTY ADDRESS: 78	O CLI TO VILLE	E TO SEWER-
	O SW Bethlehem Are Foot 11	81
DIRECTIONS TO PROPERTY-	O SW Bethlehem Are. Fort white	= 32038
	Take 41 S, TR on CR-778, TR	
property on L	- 1/8, IK	on Beth lehous to
. / /		10
HTT DTWA		
BUILDING INFORMATION	[K] RESIDENTIAL [] COMME	
nit Type of	[] COMMERCIAL	
Establishment		
	Bedrooms Area Sqft Table I, Chapter 62-	Lonal System Design
SEO		b, FAC
2 SFR-MH	_ 2 _1008	
	1000	
3	The second secon	
4		
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7 61		
] Floor/Equipment Drain	ns I 1/ou	
1	ns [] Other (Specify)	
- Comment	The same of the sa	
		And the last of th
4075 05 07	23-2064	0 0.1
4015, 06-21-2022 (Cheat	13-2064 DATE:	9-10-24
4015, 05-21-2022 (Obsol	etes previous editions which may not be used)	9-10-24



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

PERMIT #: 12-SC-2997885

APPLICATION #: AP2145446

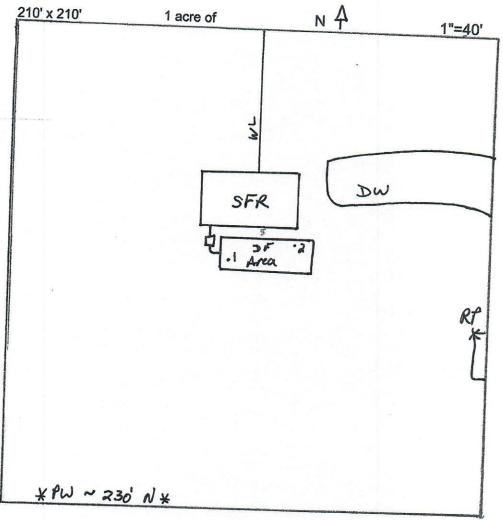
DATE PAID: 912/24

FEE PAID:____ RECEIPT #:____

DOCUMENT #: PR2155594

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: SCOTT **24-0701 HAGAN
PROPERTY ADDRESS: 1780 SW BETHLEHEM Ave Fort White, FL 32038
LOT: SUBDIVISION:
PROPERTY ID #: 09952-007 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER] [OR TAX ID NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION SECTION SECTION SECTION SECTION SECTION OF SYSTEM DOES NOT GUARANTI 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 VOIL 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 [900] GALLONS / GPD New Multi-Chambered Septic 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 [250] SQUARE FEET Drainfield SYSTEM R [] SQUARE FEET N/A SYSTEM A TYPE SYSTEM: [*] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [*] TRENCH [] BED []
F LOCATION OF BENCHMARK: NW corner of barn slab
E BOTTOM OF DRAINFIELD TO BE [5.00] [INCHES FT] [ABOVE BELOW BENCHMARK/REFERENCE POINT [23.00] [INCHES FT] [ABOVE BELOW BENCHMARK/REFERENCE POINT
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] INCHES
The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated flow of 200 gpd. THE R
SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP
APPROVED BY: TITLE: Environmental Specialist I Columbia CUD
DATE ISSUED: 09/16/2024 EXPIRATION DATE: 03/16/2026
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) Incorporated 62-6.004, FAC Page 1 of 3

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STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 24-070

PART II - SITEPLAN----Scale: Each block represents 10 feet and 1 inch = 40 feet. Notes: Site Plan submitted by Plan Approved_ Not Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) incorporated: 62-6.004,F.A.C.

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