

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

PERMIT NO.	23-0594
DATE PAID: FEE PAID:	8 1 1 9 3
RECEIPT #:	1984255

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR:  [ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Repair [ ] Abandonment [ ] Temporary [ ]
APPLICANT: MARK S. GOODSON FOREST LE EMAIL: PGOODSON COMCAST, NET
AGENT: OWNER TELEPHONE: 386-303-2491
MAILING ADDRESS: 337 SW TOMPKINS ST. 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: 17 BLOCK: SUBDIVISION: FIVE ASH FOREST PLATTED:
PROPERTY ID #: 28-35-16-02376-0020NING: MHP I/M OR EQUIVALENT: [Y/N]
PROPERTY SIZE: 36 ACRES WATER SUPPLY: [ ] PRIVATE PUBLIC [ ] <= 2000GPD [ ] > 2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [(Y / N ] DISTANCE TO SEWER: 45 FT
PROPERTY ADDRESS: 153 NW WILLOWBROOK LANE, LAKE CITY FL 32024
DIRECTIONS TO PROPERTY: HWY 90 WEST, TURN RIGHT ON BROWN RD
TURN RIGHT ON THE TURN BERRY. TURN RIGHT ON
WILLOWBROOK LN. THIRD LOT ON LEFT.
BUILDING INFORMATION [   RESIDENTIAL [ ] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table I, Chapter 62-6, FAC
SINGLE/MULTI FAM 2 1363 ORIGINAL ATTACHED
3
4
[ ] Floor/Equipment Drains / [ ] Other (Specify)
SIGNATURE: Mark & Daofon DATE: 8-15-23

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

## STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

3-0594 Permit Application Number ----- PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet. Notes: Site Plan submitted by:\_ Plan Approved\_ County Health Department

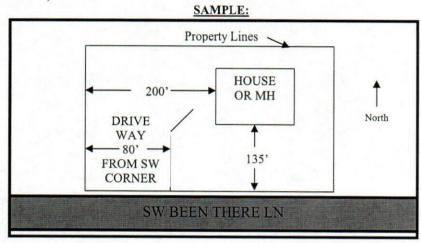
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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## Page 2, Site Plan for 9-1-1 Address Application From

23-0594

- 1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
- 2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
- 3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
- 4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).



## SITE PLAN BOX:

