





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

PERMIT NO. 20-1086
DATE PAID: 20-20
FEE PAID: 310-20
RECEIPT #: 92407403

## APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:  [ ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Repair [ ] Abandonment [ ] Temporary [ ]
APPLICANT: 10000 Hanna EMAIL: OFISEPTICTANK acommand. CV
AGENT: ROBERT FOR III - North Florida Septic Tank INC TELEPHONE: 386-955-637
MAILING ADDRESS: MILL SE State Road 100, Lake City, F1 32025
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 SYSTEM IS ON OSTDS REMEDIATION PLAN? [Y / N ]  LOT: OT BLOCK: SUBDIVISION: SUWANDER VALUE FLATTED:  PROPERTY ID #22-25-10-0100-0020NING: I/M OR EQUIVALENT: [Y / N ]  PROPERTY SIZE: A ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD  IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / X] DISTANCE TO SEWER: FT  PROPERTY ADDRESS: 8008 NW US HOULE AS TIO TO SEWER: FT  DIRECTIONS TO PROPERTY: US 41 North OUT PAST II-10 To S. Leon
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
No Establishment Bedrooms Area Sqft Table I, Chapter 62-6, FAC
2
3
4
[ ] Floor/Equipment Drains [ ] Other (Specify)
SIGNATURE: ROBERT FORDILL DATE: 12-15-2022
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) Incorporated 62-6.004, FAC Page 1 of 4



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

PERMIT #: 12-SC-2623114

APPLICATION #: AP1926763

DATE PAID: 12.16.22

FEE PAID: 310.64

RECEIPT #:\_\_\_

DOCUMENT #: PR1882737

CONSTRUCTION PERMIT	T FOR: OSTDS New	
	AS**22-1006 HANNA	
	8698 NW US HWY 41 Lake City, FL 32055	
LOT: 7	BLOCK: SUBDIVISION: Suwannee Valley Estates	
PROPERTY ID #: 01	[SECTION, TOWNSHIP, RANGE [OR TAX ID NUMBER]	E, PARCEL NUMBER]
SATISFACTORY PERFO WHICH SERVED AS PERMIT APPLICATION ISSUANCE OF THIS	AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTE FORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APP	IN MATERIAL FACTS, LICANT TO MODIFY THE MADE NULL AND VOID.
SYSTEM DESIGN AND S	SPECIFICATIONS	
T [ 900 ] GALL	LONS / GPD Septic Tank CAPACITY	
A [ ] GALL	LONS / GPD N/A CAPACITY	
N [ ] GALLO	ONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 12	50 GALLONS]
K [ ] GALLO	ONS DOSING TANK CAPACITY [ ]GALLONS @[ ]DOSES PER 2	4 HRS #Pumps [ ]
D 1 275 1 000000	D. C.	
	RE FEET Drainfield SYSTEM	
R [ ] SQUAR	RE FEET N/A SYSTEM	
A TIPE SISTEM:	[X] STANDARD [ ] FILLED [ ] MOUND [ ]	
N CONFIGURATION:	[X] TRENCH [] BED []	
	HMARK: 20" Oak Tree W of Site	
	POSED SYSTEM SITE [ 24.00 ] [ INCHES / FT ] [ ABOVE / BELOW] BENCH	
E BOTTOM OF DRAINFI	TELD TO BE [ 54.00 ] [ INCHES   FT ] [ ABOVE   BELOW ] BENCH	MARK/REFERENCE POINT
L		
D FILL REQUIRED:	[ 0.00 ] INCHES EXCAVATION REQUIRED: [ 0.00 ] INCHES	
The system is sized	for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total	estimated flow of
O 300 gpd.	, , , , , , , , , , , , , , , , , , , ,	
T		
H		
		1
E Vac a si	1	
R Keep system	n on lot 6. Lot 6 is 110' EtoW.	
SPECIFICATIONS BY:	Robert Ford TITLE: Master Contractor	
APPROVED BY:	Cassandra Bonds TITLE: Environmental Specialist I	Columbia CHD
DATE ISSUED:	12/19/2022 EXPIRATION	DATE: 06/19/2024
DH 4016, 08/09 (Obs	soletes all previous editions which may not be used)	
	-6.003, FAC	Page 1 of 3

## STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL	L SYSTEM CONSTRUCTION PERMIT
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APPLICATION FOR ONSITE SERVAGE DISPOS	SAL SYSTEM CONSTRUCTION PERMIT
1"= 40"	Permit Application Number 22 1000
PART II - SIT	EPLAN Hanna

See Alt

Notes:		
	70 3 4	
4:11	The state of the s	
	15-1990 Date: 12-15-202:	Z MASTER CONTRACTOR
Plan Approved	Not Approved	Date
By Wrach	12/19/22	County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) incorporated: 64E-6.001, FAC (Stock Number: 6744-002-4015-8)