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SSD 242 404 271

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

PERMIT NO. 24-0717
DATE PAID: 7/20/24
FEE PAID: 725.00
RECEIPT #: 2147/81

APPLICATION FOR CONSTRUCTION PERMIT

~~65932~~

APPLICATION FOR:

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

APPLICANT: Craig / Lisa Terry

EMAIL: Cterrypwc@gmail.com

AGENT: Jeff Baker

TELEPHONE: 352-339-6387

MAILING ADDRESS: PO Box 1929 High Springs, FL 32655

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: 23 BLOCK: _____ SUBDIVISION: Thornwood PLATTED: yes

PROPERTY ID #: 34-65-16-0456-123 ZONING: SFD I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 1.11 ACRES WATER SUPPLY: [] PRIVATE PUBLIC ☒ <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 284 SW thistlewood LN. Fort White, FL 32038

DIRECTIONS TO PROPERTY: South on US 441. Right on CR18. Right on greenwood Terrace. Left on thistlewood LN. House on left.

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>SFD</u>	<u>3</u>	<u>1843</u>	
2				
3				
4				

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Jeff P. Baker

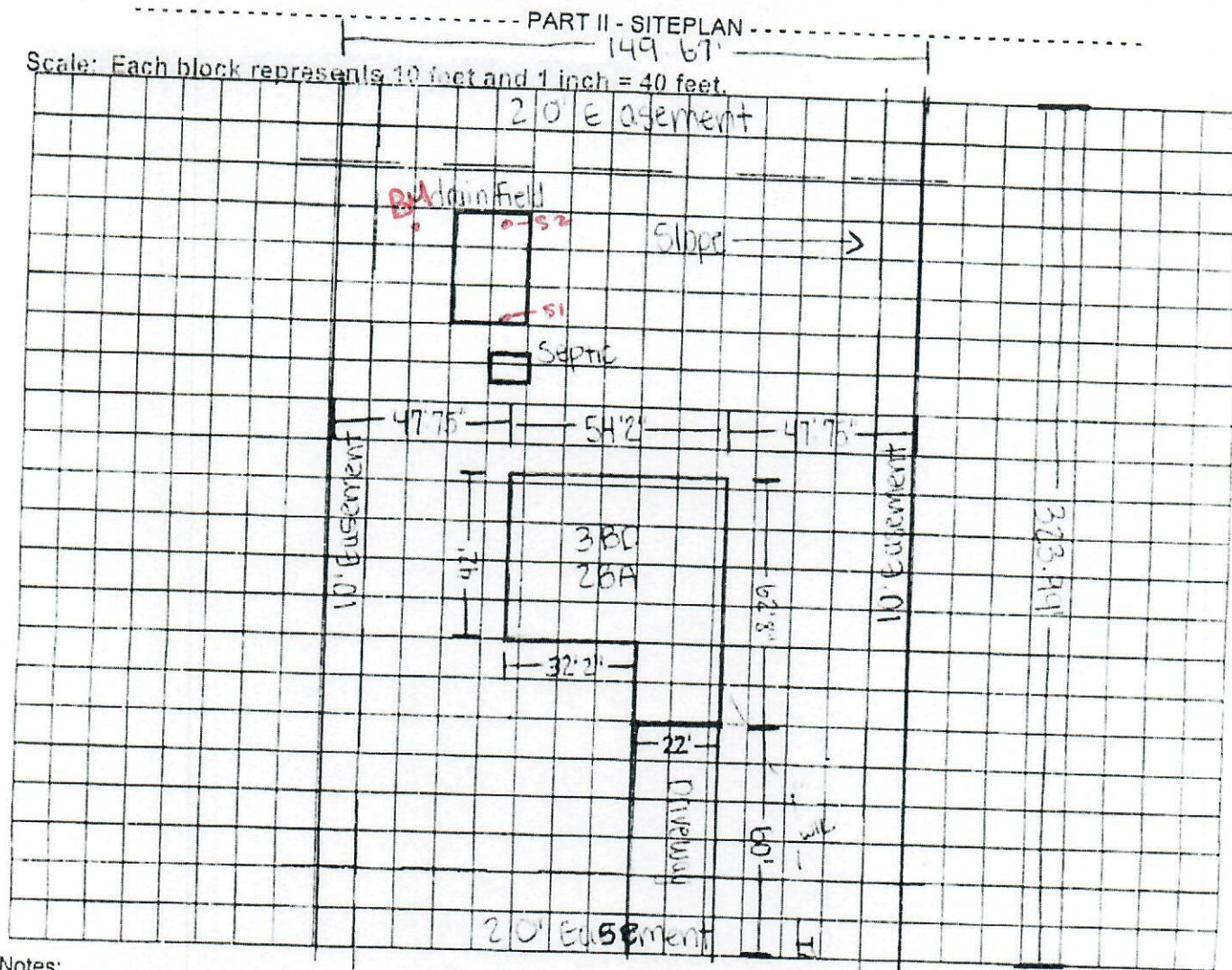
DATE: 9-17-24

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

Incorporated 62-6.004, FAC

PART II - SITEPLAN

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



Notes:

284 SW Thistlewood LN. Fort White, FL

City Water

Site Plan submitted by:

[Signature] P. Bolan

Agent: ☒

Owner: ☐

Date: 11-13-24

Plan Approved ☒

Not Approved ☐

Date: 11/13/24

By

[Signature]

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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-3000639
APPLICATION #: AP2147181
DATE PAID: 9/20/24
FEE PAID: 425.00
RECEIPT #:
DOCUMENT #: PR2184814

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: CRAIG**24-0717 TERRY
PROPERTY ADDRESS: 284 SW THISTLEWOOD Fort White, FL 32038
LOT: 23 BLOCK: SUBDIVISION: Thornwood
PROPERTY ID #: 04056-123 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, 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 [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 [462] SQUARE FEET Drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [X] TRENCH [] BED []
N
F LOCATION OF BENCHMARK: Nail in tree w/ pink ribbon SE of system site
I ELEVATION OF PROPOSED SYSTEM SITE [13.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [28.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [3.00] INCHES EXCAVATION REQUIRED: [] INCHES

O The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of
T 300 gpd.
H
E
R

SPECIFICATIONS BY: Sean P Havens TITLE: Environmental Specialist I

APPROVED BY: [Signature] TITLE: Environmental Specialist I Columbia CHD
Sean P Havens

DATE ISSUED: 11/13/2024 EXPIRATION DATE: 05/13/2026

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