

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

PERMIT #: 12-SC-2512419

APPLICATION #: AP1837593

DATE PAID: 5/26/27

FEE PAID:

RECEIPT #:___

DOCUMENT #: PR1768249

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: TREVIN**22-0476 MICAEL/C. BRACKIN	
PROPERTY ADDRESS: NW FALLING CREEK Lake City, FL 32055	
LOT: SUBDIVISION:	
PROPERTY ID #: 04806-001 [SECTION, TOWNSHIP, RANGE, PARCE]	EL NUMBER]
	NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS	
T [900] GALLONS / GPD Septic Tank CAPACITY	
A [] GALLONS / GPD N/A CAPACITY	
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALL	ONS]
K [] GALLONS DOSING TANK CAPACITY []GALLONS @[]DOSES PER 24 HRS	#Pumps []
D [375] SQUARE FEET Drainfield SYSTEM R [] SQUARE FEET N/A SYSTEM A TYPE SYSTEM: [] STANDARD [] FILLED [x] MOUND [] I CONFIGURATION: [x] TRENCH [] BED []	
F LOCATION OF BENCHMARK: nail in tree E. of site.	
I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES FT] [ABOVE BELOW BENCHMARK/RE	
E BOTTOM OF DRAINFIELD TO BE [12.00] [INCHES FT] [ABOVE BELOW BENCHMARK/RE	FERENCE POINT
L	
D FILL REQUIRED: [30.00] 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 300 gpd.	I flow of
н	
E	
R	
SPECIFICATIONS BY: Ronald Ford TITLE:	
APPROVED BY: TITLE: Environmental Specialist II	Columbia CHD
DATE ISSUED: 05/27/2022 EXPIRATION DATE:	11/27/2023
DH 4016, 08/09 (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

	7 1171
PERMIT NO.	9-0416
DATE PAID:	5 No 22
FEE PAID:	310.00
RECEIPT #:	837593

APPLICATION FOR: New System [] Existing System [] Holding Tank [] Innovative Repair [] Abandonment [] Temporary []
APPLICANT: TREVEN MICAEL & CRYSTAL GAIL BRACKIN
AGENT: Ronald Ford - Ford's Septic TELEPHONE: 386-755-6288
MAILING ADDRESS: 116 NW Lawtey Way Lake City, Florida 32055
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
LOT: N/A BLOCK: N/A SUBDIVISION: MEETS & BOUNDS PLATTED:
PROPERTY ID #: 30-2S-17-04806-001 ZONING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 6.05 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /N] DISTANCE TO SEWER: NIN FT
PROPERTY ADDRESS: TBD NW FALLING CREEK ROAD LAKE CITY, FLORIDA 32055
DIRECTIONS TO PROPERTY:
HWY 41 NORTH. TURN RIGHT ON FALLING CREEK ROAD. LOT ON right - just.
before NW Mershon Street. [911 address pending
before NW Mershon Street. (911 address pending BUILDING INFORMATION X1 RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
MOBILE HOME 3 1560
2
3
4
[] Floor/Equipment Dyains [] Other (Specify)
SIGNATURE: QC Herel Rouglo Form DATE: 5-24-2022

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONST	RUCTION PERMIT	17 117)
North	Permit Application Number	22-04/6
PART II – SITE	PLAN	NOT THE THE THE THE THE THE THE THE THE TH
338' one ocre	total of	6.05 acres
ing Creek R	* one of details (to sca attach	cre s shown le)on ed sheet
-NW Falling		
Notes:		
	806.001	
	alling Creek Ro	ad
Lake City,	Flonda 32055	
one i lair odelilition of.	onald Ford	//20/2-
Plan Approved Not Approved	mbia CHDDa	2/0/10
Ву	Cour	nty Health Department
ALL CHANCES MUST BE APPROVED BY T	HE COUNTY HEALTH DEPART	MENT

