



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM  
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 21-00810  
DATE PAID: 1/4/21  
FEE PAID: 310.00  
RECEIPT #: 1211030

APPLICATION FOR:  
☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative  
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Gibraltar Contracting, LLC (owner: Constance Buchanan)

AGENT: Mark Bauer TELEPHONE: 352-253-2002

MAILING ADDRESS: 20267 NW 248<sup>th</sup> Way High Springs, FL 32643

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: 11 BLOCK:        SUBDIVISION: Westwind Estates PLATTED:       

PROPERTY ID #: 07-45-16-0299-111 ZONING: Res. I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 5.0 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 410 SW Madison Ct. Lake City, FL 32024

DIRECTIONS TO PROPERTY: Take US 90 West to Pinemount Rd. Take Pinemount Rd to Madison Ct on Left. Website is on Right just before Cul-de-sac

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>New SFD</u>	<u>3</u>	<u>2436 HK</u>	
2			<u>3500 TOTAL</u>	
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)       

SIGNATURE: [Signature] R. Ford DATE: 12-17-2020



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-0010

----- PART II - SITEPLAN -----

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



Notes: 410 SW Madison Court  
Lake City, Florida 32024

Site Plan submitted by: RC 2d - Ronald Ford

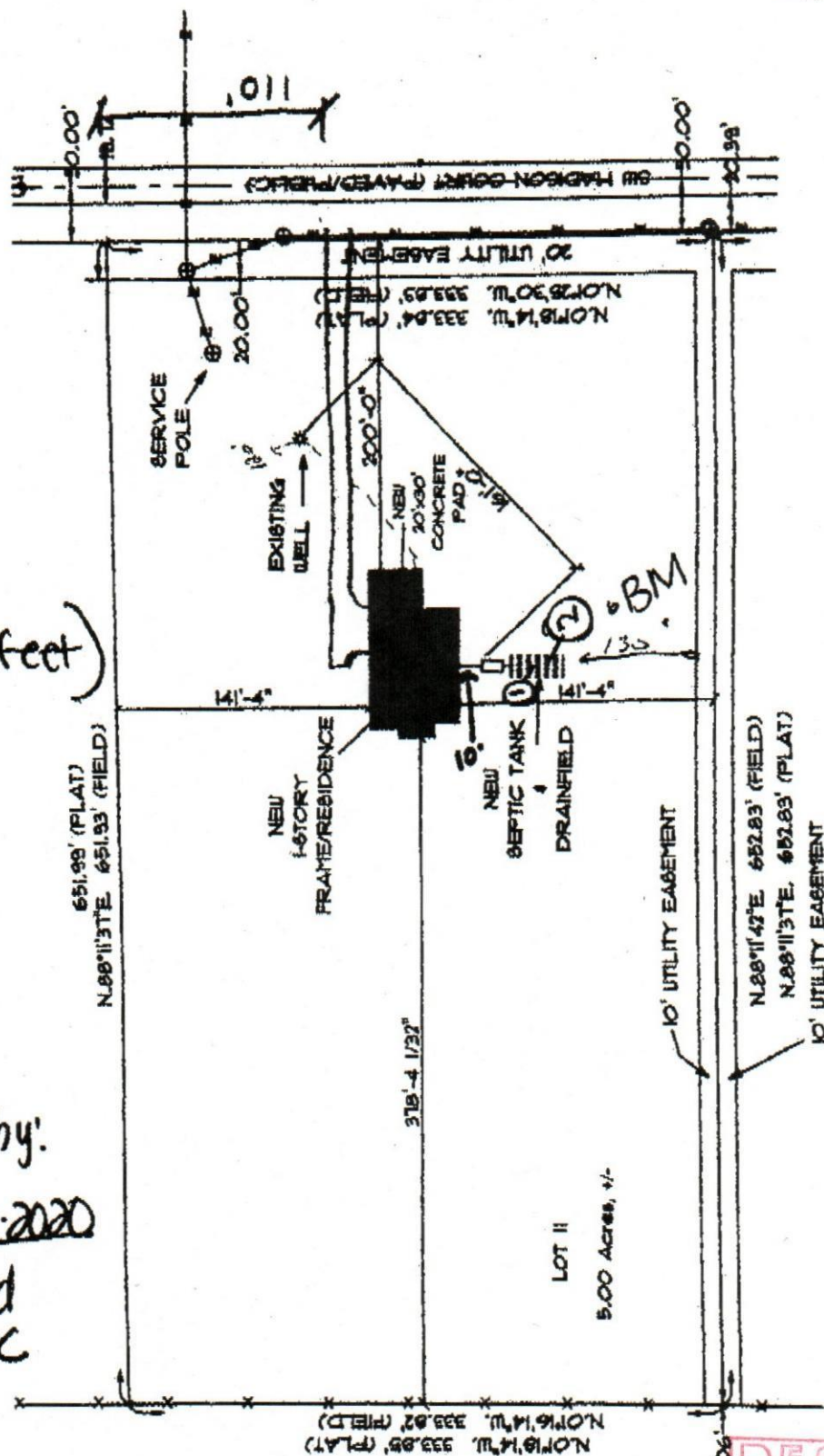
Plan Approved X Not Approved \_\_\_\_\_ Date 1/26/21

By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

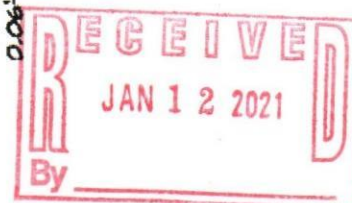
↑  
NORTH

Scale:  
(one inch = 100 feet)



0100-72

Submitted by:  
RC 12-21-2020  
Ronald Ford  
Ford's Septic







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

PERMIT #: **12-SC-2218600**  
APPLICATION #: **AP1611030**  
DATE PAID: **11/6/21**  
FEE PAID: **310.00**  
RECEIPT #:  
DOCUMENT #: **PR1497908**

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: CONSTANCE\*\*21-0010 BUCHANAN  
PROPERTY ADDRESS: 410 MADISON Lake City, FL 32024  
LOT: 11 BLOCK: SUBDIVISION: WESTWIND  
PROPERTY ID #: 02791-111 [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 [ 1,050 ] 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 [ 500 ] SQUARE FEET Drainfield SYSTEM  
R [ ] SQUARE FEET N/A SYSTEM  
A TYPE SYSTEM: [X] STANDARD [ ] FILLED [ ] MOUND [ ]  
I CONFIGURATION: [X] TRENCH [ ] BED [ ]

F LOCATION OF BENCHMARK: Nail in cherry oak east of septic system

I ELEVATION OF PROPOSED SYSTEM SITE [ 24.00 ] [ INCHES ] FT [ ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 54.00 ] [ INCHES ] FT [ ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

L  
D FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [ ] INCHES

O  
T  
H  
E  
R  
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 400 gpd.

SPECIFICATIONS BY: Ronald Ford TITLE: M. Contractor

APPROVED BY: [Signature] TITLE: Enviromental Specialist I Columbia CHD  
[Sean F Havens]

DATE ISSUED: 01/12/2021 EXPIRATION DATE: 07/11/2022

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC