



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

FW

#46302 (1771) (50)

PERMIT NO. 20-5448
DATE PAID: 4/9/20
FEE PAID: 310.00
RECEIPT #: 1509022

APPLICATION FOR:

[X] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: BULLARD MCARDLE LLC (FREEDOM/ BALREE)

AGENT: North Florida Septic Tank Inc; TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE State Road 100 Lake City, Fla 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

LOT: 25 BLOCK: B SUBDIVISION: ICHETUCKNEE FOREST PH 2 PLATTED: NA

PROPERTY ID #: 02-6S-15-00502-225 ZONING: NA I/M OR EQUIVALENT: [Y/N]

PROPERTY SIZE: 5.01 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [No] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: TBD LONCALA LOOP, ICHETUCKNEE FOREST FORT WHITE, FLA 32038

DIRECTIONS TO PROPERTY: CR 247S TO CR 137 (L) TO 256TH (L), TO THE 2ND LONCALA LOOP RD (L)

DOWN TO SITE ON (R)

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

| Unit No | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC |
|---------|-----------------------|-----------------|--------------------|--|
| 1 | MOBILE HOME | 3 | 2083 | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

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

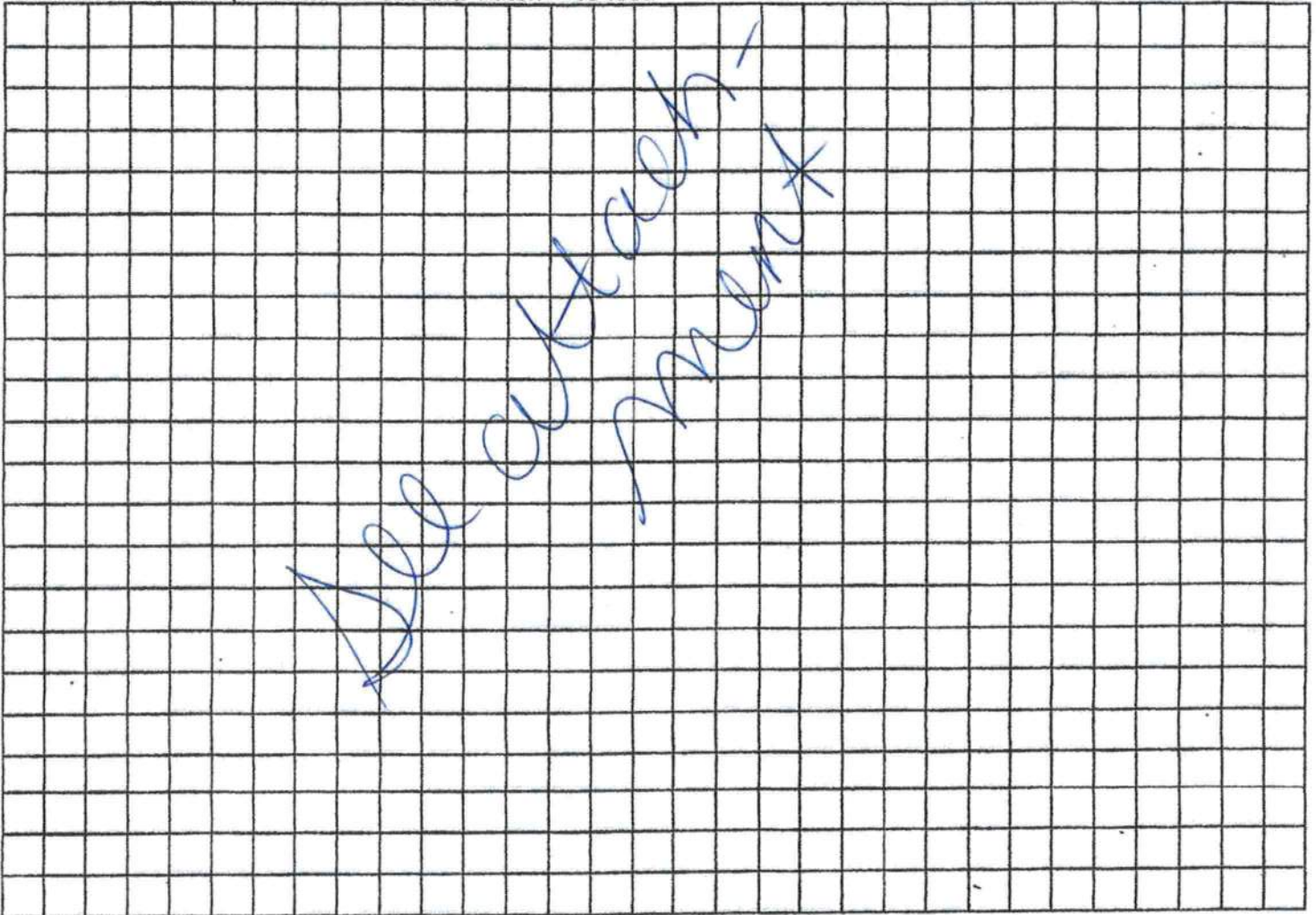
SIGNATURE: [Signature] DATE: 6-3-2020

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 20-0448

~~HEALTH - SITE PLAN~~

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



Notes: _____

Site Plan submitted by: Robert W. Ford III Date _____

Plan Approved _____ Not Approved _____ Date 6/10/2020

By Kell Rapp 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

PERMIT #: 12-SC-2089873
APPLICATION #: AP1509022
DATE PAID: 6/9/2020
FEE PAID: 5310.00
RECEIPT #: 1509022
DOCUMENT #: PR1352472

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: BULLARD**20-0448 MCARDLE LLC
PROPERTY ADDRESS: LONCALA Loop Fort White, FL 32038
LOT: 25 BLOCK: B SUBDIVISION: Ichetucknee Forest U-2
PROPERTY ID #: 00502-225 [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 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 [375] 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 16" oak tree S of site
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

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

SPECIFICATIONS BY: William D Bishop II TITLE: Master Septic Contractor
APPROVED BY: Kelli C Rogers TITLE: Environmental Specialist II Columbia CHD
DATE ISSUED: 06/10/2020 EXPIRATION DATE: 12/10/2021

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

