

31392

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-11) Zoning Official BLK 23 AUG 2013 Building Official J.C. 8-21-13

AP# 1308-50 Date Received 8/14/13 By LH Permit # 31392

Flood Zone PhX Development Permit N/A Zoning A-3 Land Use Plan Map Category ES4+ A-3

Comments Submitted Survey indicates existing elevation to be 91.9' which will meet finished floor requirement for Floodable Zone X

FEMA Map# 0167C Elevation 87.0' Finished Floor 87.0 River Suwannee In Floodway N/A

☒ Site Plan with Setbacks Shown ☒ EH # 13-0430R ☐ EH Release ☒ Well letter ☒ Existing well

☒ Recorded Deed or Affidavit from land owner ☒ Installer Authorization ☒ State Rd Access ☒ 911 Sheet

☐ Parent Parcel # ☐ STUP-MH ☐ F W Comp. letter ☒ App Fee Pd ☒ VF Form

IMPACT FEES: EMS ☐ Fire ☐ Corr ☐ Out County ☒ In County

Road/Code ☐ School ☐ = TOTAL ☐ Suspended March 2009 ☒ Wellisville Water Sys

Property ID # 19-2S-16-01655-208 Subdivision 411A 6th Joy Estate Unrec.

- New Mobile Home ☒ Used Mobile Home ☐ MH Size 32x14 Year 2013
- Applicant TREEA FOSTER/TEANY CORBETTS Phone # 386-362-4948
- Address 10314 US Hwy 90 W Live Oak, FL
CHRIS A. BULLARD PO BOX 1132 Lake City, FL 32056
- Name of Property Owner HENRY HARRELL Phone # 397-2038 386-751-6699
- 911 Address 284 NW Blue Dr, White Springs FL 32096
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home HENRY HARRELL Phone # 397-2038
Address 3059 NW Suwannee Valley Rd. Lake City, FL
- Relationship to Property Owner Mortgagee
- Current Number of Dwellings on Property 1
- Lot Size 333 & 332' Total Acreage 2.55
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home yes
- Driving Directions to the Property From White Springs Take 136 just before you cross River make Rth (Old White Springs Rd) go to End make (L) onto Suwannee Valley Rd go 1/2 mile on (L) Fence & Gate w/ American Flag
- Name of Licensed Dealer/Installer PAUL ALBRIGHT Phone # 386-365-5314
- Installers Address 169 S.W. Thomas Terr. LAKE CITY FL 32021
- License Number IH/1025239 Installation Decal # 15950

Just Pass that on (L) Blue Lane. Stay (L) you will see No Trespassing sign on (L) That's it.

\$375.00

plot # 1530

411 North Suwannee Valley Rd, P Blue Dr,
2nd on (L)

PERMIT NUMBER

Installer Paul E. Albright License # TH1025239-1

Address of home being installed 204 N.W. Blue Rd.

Manufacturer White Spigs, Inc. Length x width 64' x 32'

NOTE: if home is a single wide fill out one half of the blocking plan if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in. Installer's initials F. Alb

New Home ☒ Used Home ☐
Home installed to the Manufacturer's Installation Manual ☒

Home is installed in accordance with Rule 15-C ☒

Single wide ☐ Wind Zone II ☒ Wind Zone III ☐

Double wide ☒ Installation Decal # 15950

Triple/Quad ☐ Serial # 918659

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" x 24" (576)*	26" x 26" (676)
1000 psf	3'	3'	4'	5'	6'	7'	8'
1500 psf	4' 6"	4' 6"	6'	7'	8'	8'	8'
2000 psf	6'	6'	8'	8'	8'	8'	8'
2500 psf	7' 6"	7' 6"	8'	8'	8'	8'	8'
3000 psf	8'	8'	8'	8'	8'	8'	8'
3500 psf	8'	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17' x 25'

Perimeter pier pad size 16' x 16'

Other pier pad sizes (required by the mfg.) 30' x 30'

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
17 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.



List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening Pier pad size

16 ft 30' x 30'

Doors 17' x 25'

Doors 17' x 25'

ANCHORS

4 ft 5 ft Center

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

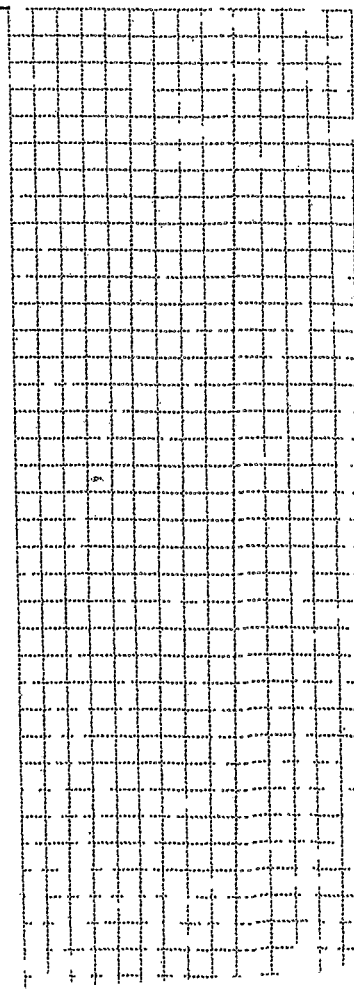
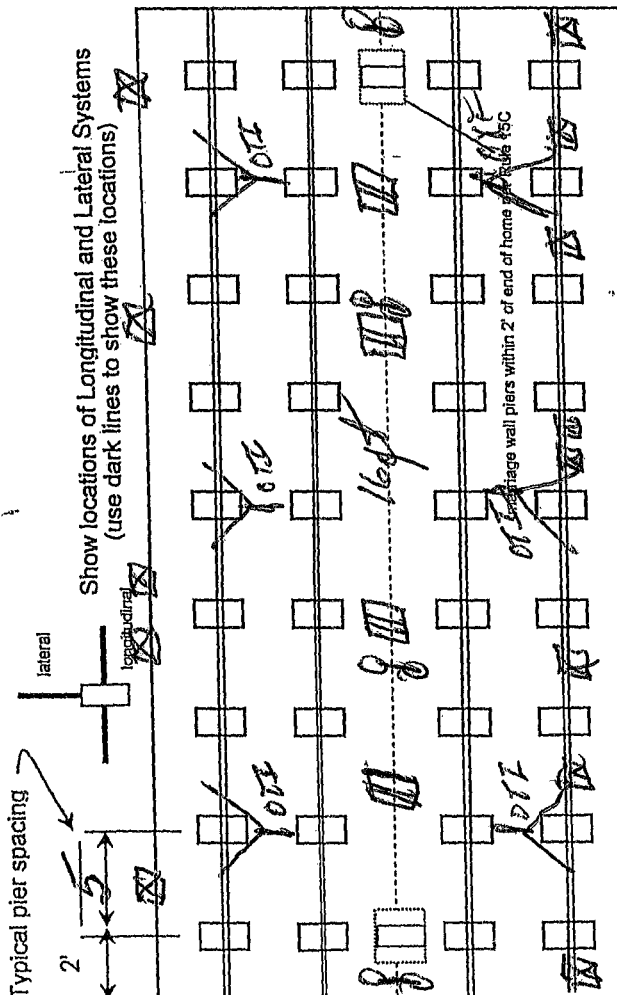
OTHER TIES

Number 12

Sidewall
Longitudinal
Marriage wall
Shearwall

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer



POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to _____ psf or check here to declare 1000 lb. soil _____ without testing.

X1285 X1285 X1285

POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

X1285 X1285 X1285

TORQUE PROBE TEST

The results of the torque probe test is 290 inch pounds or check here if you are declaring 5' anchors without testing _____. A test showing 275 inch pounds or less will require 5 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb. holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

Plumbing

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 1285

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 1285

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 1285

Site Preparation

Debris and organic material removed _____
Water drainage: Natural _____ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: Lags Length: 8" Spacing: 2 ft
Walls: Type Fastener: Strap Length: 6" Spacing: 16 ft
Roof: Type Fastener: Strap Length: 6" Spacing: 2 ft
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials

Type gasket

Installed:

Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or taped. Yes _____ Pg. _____
Siding on units is installed to manufacturer's specifications. Yes _____
Fireplace chimney installed so as not to allow intrusion of rain water. Yes _____

Miscellaneous

Skirting to be installed. Yes _____ No _____
Dryer vent installed outside of skirting. Yes _____ N/A _____
Range downflow vent installed outside of skirting. Yes _____
Drain lines supported at 4 foot intervals. Yes _____
Electrical crossovers protected. Yes _____
Other: _____

Installer verifies all information given with this permit worksheet is accurate and true based on the

manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature

Karl E. Wright

Date 8-14-13

MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said license shall be renewed annually, and each licensee shall pay a fee of \$150.

I, Paul E Albright, license number IH 1025239-1
Please Print

do hereby state that the installation of the manufactured home for Henry
Applicant

Barbara Harrell at 204 N.W. Blue Dr. White Springs,
911 Address FL 32096

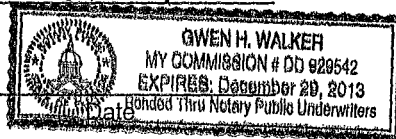
will be done under my supervision.

Paul E Albright
Signature

Sworn to and subscribed before me this 14th day of August,
2013.

Notary Public: Gwen H. Walker
Signature

My Commission Expires:



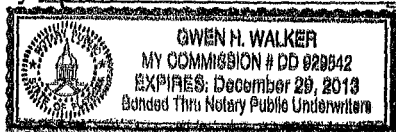
AFFIDAVIT

I certify that the following described mobile home being placed on the referenced parcel is not a Wind Zone 1 mobile home.

Customer's Name: Henry, Barbara
Property ID: Sec: 19 Twp: 25 Rge: 16 Tax Parcel No: 01655-208
Lot: 48 Block: _____ Subdivision: Joy Estates
Mobile Home Year/Make: 2013 - Palm Harbor Size: 32x64

Paul E. Albright
Signature of Mobile Home Installer

Sworn to and subscribed before me this 14th day of August, 2013
by Paul E. Albright



Notary's name printed/typed

Gwen H. Walker
Notary Public, State of Florida
Commission No. _____
Personally Known: ☒
Produced ID (type) _____



COLUMBIA COUNTY BUILDING DEPARTMENT
135 NE Hernando Ave, Suite B-21, Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

#1-TC-99

MOBILE HOME INSTALLERS LETTER OF AUTHORIZATION

I, Paul E. Albright, give this authority for the job address show below
Installer License Holder Name

only, 284 N.W. Blue Rd White Springs, FL 32086 and I do certify that
Job Address

the below referenced person(s) listed on this form is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Authorized Person	Signature of Authorized Person	Authorized Person is... (Check one)
TREEA FOSTER		☒ Agent ☐ Officer ☐ Property Owner
GWEN WALKER		☒ Agent ☐ Officer ☐ Property Owner
		☐ Agent ☐ Officer ☐ Property Owner

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and I am fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances.

I understand that the State Licensing Board has the power and authority to discipline a license holder for violations committed by him/her or by his/her authorized person(s) through this document and that I have full responsibility for compliance granted by issuance of such permits.

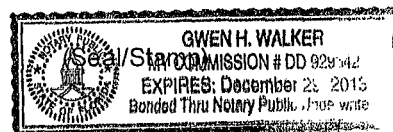
X Paul E. Albright EH-1025239 8-14-13
License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Suwannee

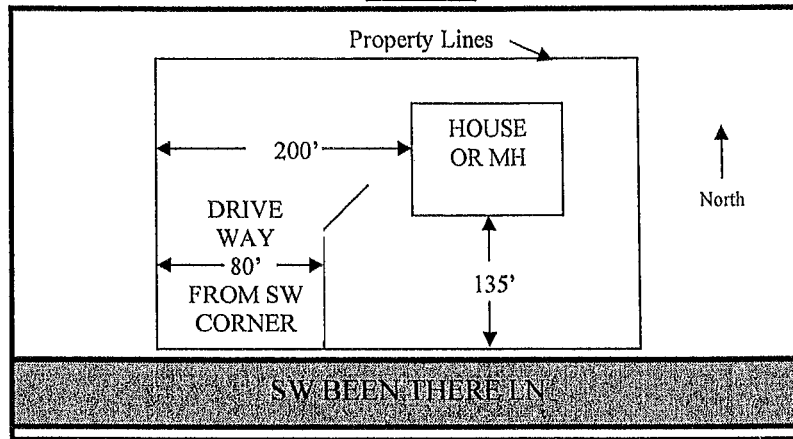
The above license holder, whose name is Paul E. Albright, personally appeared before me and is known by me or has produced identification (type of I.D.): Known personally on this 14th day of Aug., 2013.

NOTARY'S SIGNATURE



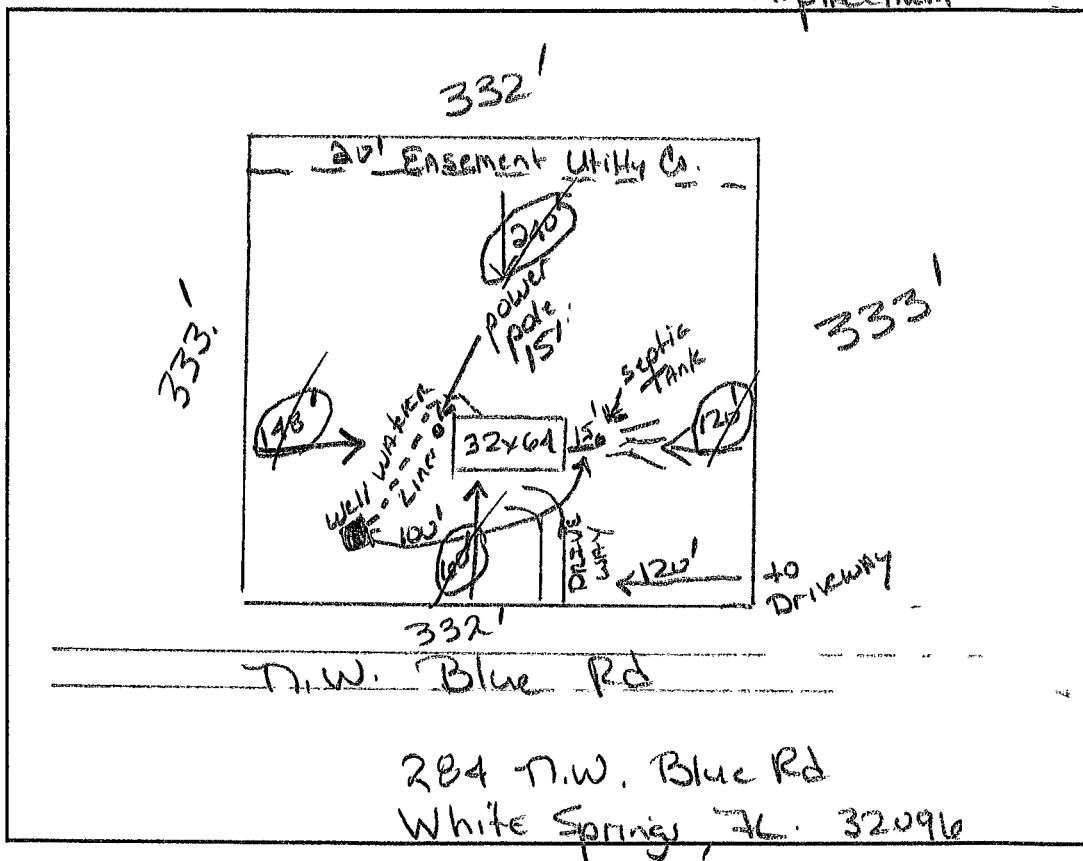
1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:

Replacement



RT. 18 BOX 555
SISTERS WELCOME ROAD
LAKE CITY, FLA. 32025
(904) 758-9831 OFFICE
(904) 752-3605 FAX

Columbia County Property Appraiser

CAMA updated 8/13/2013

2012 Tax Year

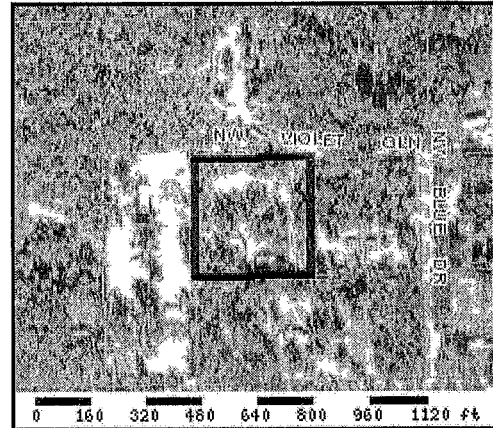
Parcel: 19-2S-16-01655-208

[<< Next Lower Parcel](#)
[Next Higher Parcel >>](#)
[Tax Collector](#)
[Tax Estimator](#)
[Property Card](#)
[Parcel List Generator](#)
[Interactive GIS Map](#)
[Print](#)

Search Result 1 of 1

Owner & Property Info

Owner's Name	BULLARD PROPERTIES INC		
Mailing Address	P O BOX 1432 LAKE CITY, FL 32056		
Site Address	284 NW BLUE DR		
Use Desc. (code)	MISC RES (000700)		
Tax District	3 (County)	Neighborhood	19216
Land Area	2.550 ACRES	Market Area	03
Description	NOTE This description is not to be used as the Legal Description for this parcel in any legal transaction COMM SW COR OF SW1/4 OF SE1/4, RUN N 333 51 FT FOR POB RUN N 333 43 FT, E 332 56 FT, S 333 59 FT, W 332 47 FT TO POB (AKA LOT 8 JOY ESTATES UNREC) ORB 815-1217 CASE #97-1120- DR 852-766,854-459 CT 1183-537		



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt. (0)	\$10,048.00
Ag Land Value	cnt. (2)	\$0.00
Building Value	cnt. (0)	\$0.00
XFOB Value	cnt. (1)	\$300.00
Total Appraised Value		\$10,348.00
Just Value		\$10,348.00
Class Value		\$0.00
Assessed Value		\$10,348.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$10,348 Other: \$10,348 Schl: \$10,348	

2013 Working Values

NOTE:
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
10/14/2009	1183/537	CT	I	U	11	\$100.00
2/20/1998	894/1114	CD	V	U	01	\$14,900.00
2/15/1998	854/459	QC	V	U	01	\$10,700.00
9/8/1995	815/1217	CD	I	U	13	\$13,655.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0296	SHED METAL	2005	\$300.00	0000001.000	0 x 0 x 0	(000.00)

Land Breakdown

--	--	--	--	--	--	--

Chris A. Bullard

P.O. Box 1432 • Lake City, Florida 32056-1432

Attn: Treea - Corbit Mobile Homes

8/8/2013

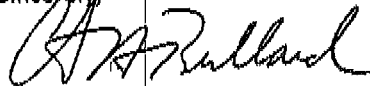
Re: Henry Harrell

To Whom This May Concern,

Bullard Properties has an unrecorded mortgage on parcel # 19-2S-16-01655-208 and Henry Harrell is the owner and deed holder. He has my permission to place a mobile home on the above referenced property.

Call if you have any questions.

Sincerely,



Chris A. Bullard

COLUMBIA COUNTY 9-1-1 ADDRESSING

P O Box 1787, Lake City, FL 32056-1787
PHONE (386) 758-1125 * FAX (386) 758-1365 * Email ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 8/14/2013 DATE ISSUED: 8/15/2013

ENHANCED 9-1-1 ADDRESS:

284 NW BLUE DR
WHITE SPRINGS FL 32096
PROPERTY APPRAISER PARCEL NUMBER:
19-2S-16-01655-208

Remarks:

RE-ISSUE OF EXISTING ADDRESS FOR NEW STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT
Columbia County 9-1-1 Addressing / GIS Department

**NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION
INFORMATION RECEIVED FROM THE REQUESTER. SHOULD,
AT A LATER DATE, THE LOCATION INFORMATION BE FOUND
TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.**

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR _____

PHONE _____

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

☒ ELECTRICAL	Print Name: <u>Henry Harrell</u> License #: <u>owner</u>	Signature: <u>[Signature]</u> Phone #: <u>391-397-2088</u>
☒ MECHANICAL/ A/C 701	Print Name: <u>Robert Grant</u> License #: <u>CAC1814931</u>	Signature: <u>[Signature]</u> Phone #: <u>391-397-2088</u>
☒ PLUMBING/ GAS	Print Name: <u>Paul E. Albright</u> License #: <u>TH-1025239</u>	Signature: <u>[Signature]</u> Phone #: <u>391-365-5314</u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Permit Subcontractor Form 1/11

87

VIOLET GLN

SUWANNEE VALLEY RD.

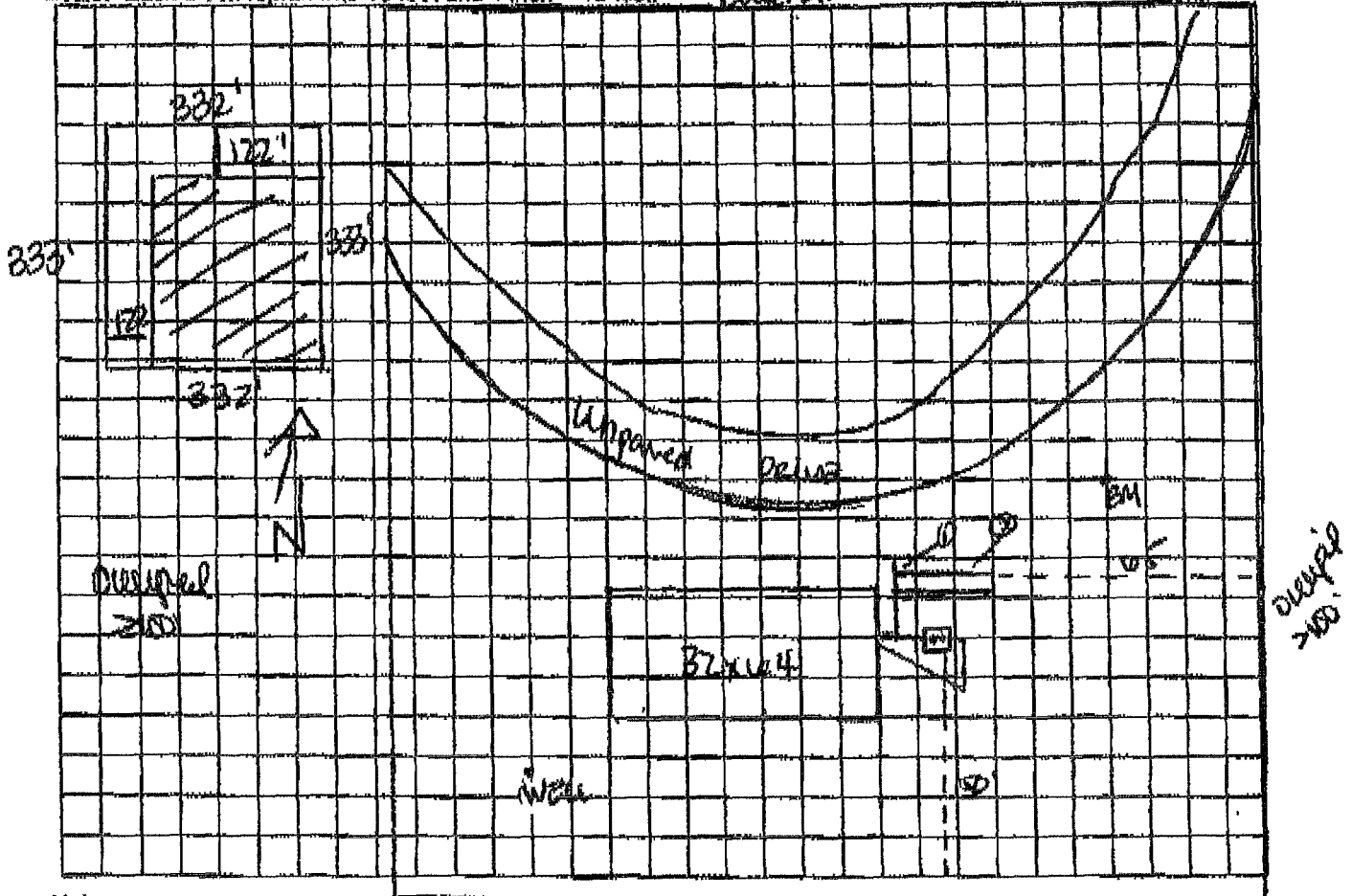
1308-50

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 13-0430

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

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



Notes: original 2100

Site Plan submitted by: [Signature]

Plan Approved [Signature]

Not Approved

By: [Signature]

Columbia CHD

Agent [Signature]
Date 8/20/13
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: 04E-6.001, FAC
(Stock Number: 374A-002-4015-6)

Page 2 of 4

SF



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

PERMIT NO. 13-8430R
DATE PAID: 8/14/13
FEE PAID: 300.00
RECEIPT #: 117210

APPLICATION FOR:

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

APPLICANT: Henry Harrell

AGENT: Treen Foster or Gwen Walker

TELEPHONE: 386-362-4948

MAILING ADDRESS: 10314 US Hwy 90 E Live Oak, FL 32060

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT, SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(a) 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: #8 BLOCK: _____ SUBDIVISION: Joy Estates PLATTED: 1984

PROPERTY ID #: 19-25-16-01655-200 ZONING: Res. I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 2.55 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ 1-2000GPD ☒ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ YES ☐ NO DISTANCE TO SEWER: 15 FT

PROPERTY ADDRESS: 284 N.W. Blue Rd White Springs, FL 32096

DIRECTIONS TO PROPERTY: From White Springs Take 136 just before you cross River make (RH) (old White Springs Rd) go to end make (L) onto Suwannee Valley Rd go 1/2 mile on (L) Fence Gate w/ American Flag just past that on (L) Blue Lane St you will see No Trespassing sign on (L) that's it.

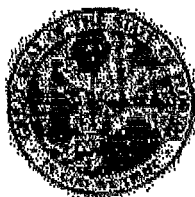
BUILDING INFORMATION

☒ 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>Mobile Home</u>	<u>3</u>	<u>2048</u>	
2				
3				
4				

☒ Floor/Equipment Design ☐ Other (Specify) _____

SIGNATURE: [Signature] DATE: 8-14-13



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

FORDS
- Peloni

PERMIT #: 12-SC-1489635
APPLICATION #: AP1117241
DATE PAID: 8-14-13
FEE PAID: 300.00
RECEIPT #: 1117241
DOCUMENT #: PR914797

CONSTRUCTION PERMIT FOR: OSTDS Repair

APPLICANT: HENRY*13-0430 HARRELL

PROPERTY ADDRESS: 284 NW BLUE Rd White Springs, FL 32096

LOT: 8 BLOCK: SUBDIVISION: Joy Estates

PROPERTY ID #: 01655-208 [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 Existing Septic Tank CAPACITY
A [0] GALLONS / GPD CAPACITY
N [0] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALLONS]
K [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DROPS PER 24 HRS #Pumps []

D [375] SQUARE FEET Drainfield SYSTEM
R [0] SQUARE FEET SYSTEM

A TYPE SYSTEM: [x] STANDARD [] FILLED [] MOUND []

I CONFIGURATION: [x] TRENCH [] BED []

N

F LOCATION OF BENCHMARK: Nail with orange ribbon in Oak tree northeast of system sills.

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: [0.00] INCHES

- 1.) 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.
2.) The proposed drainfield repair may be installed no deeper than existing.

H

E

R

SPECIFICATIONS BY: Jeremy X Gifford TITLE: Environmental Specialist I

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

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