



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

PERMIT NO. 25-0018
DATE PAID: 11/14/24
FEE PAID: 28585
RECEIPT #: 28585

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: JULIE HOROWITZ

EMAIL: JWARREN2580@GMAIL.COM

AGENT: JAMES WARREN

TELEPHONE: 863-206-5370

MAILING ADDRESS: _____

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: 12 BLOCK: _____ SUBDIVISION: Hawks Ridge acres PLATTED: _____

PROPERTY ID #: 34-6S-17-09859-812 ZONING: AG I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 11.180 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 20000 GPD ☐ > 20000 GPD

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

PROPERTY ADDRESS: 167 SE Condor Glenn High Springs

DIRECTIONS TO PROPERTY: 441 S 13 miles L on SE Sprite Loop 0.5 miles L
onto Bible Camp RD 1 mile L onto SE Jim Haley Ter, 0.3 mile onto SE Condor Glen
300ft property 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
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1	RV	1	208	original 24-8284
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: James Warren

DATE: 11-14-24

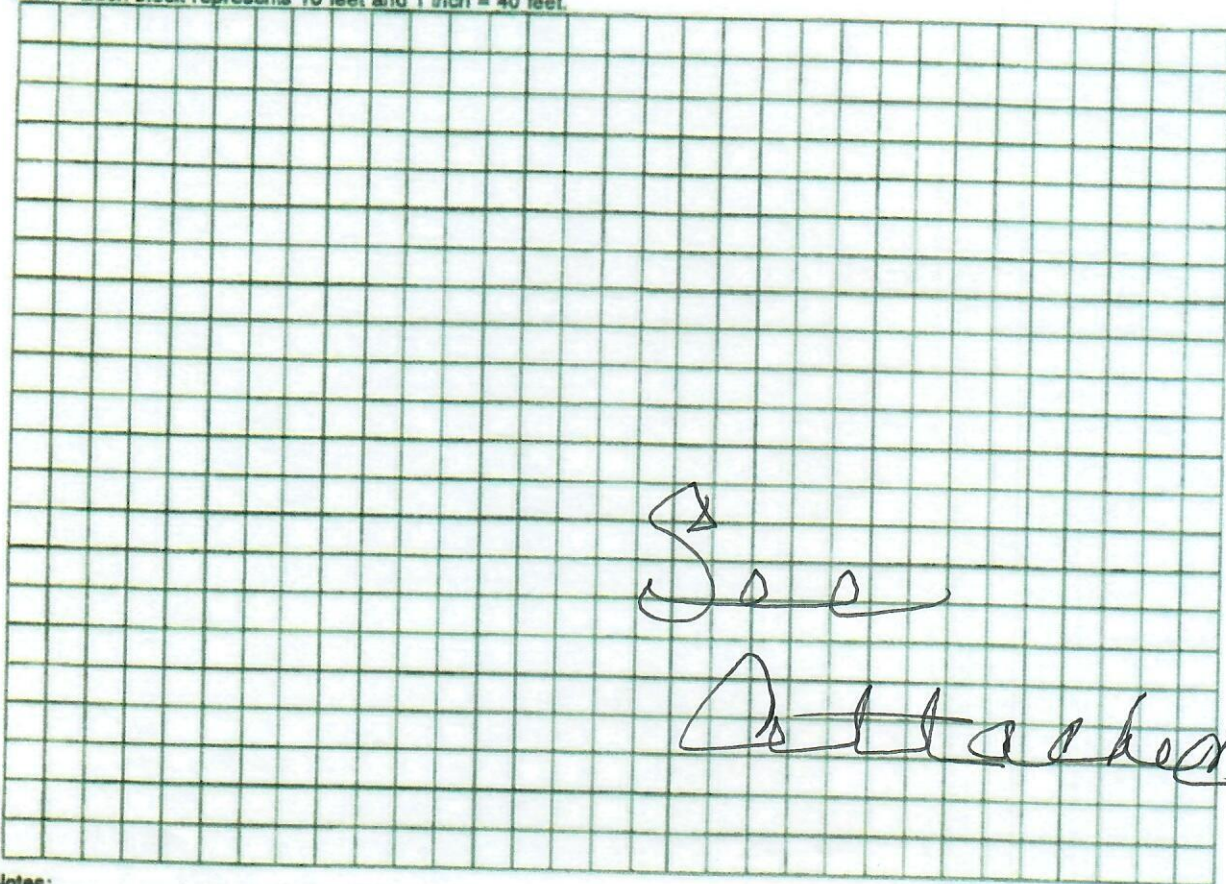
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)
Incorporated 62-6.004, FAC

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

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



Notes: _____

☒ Site Plan submitted by: James Warren

Plan Approved ☒

Not Approved ☐

By _____

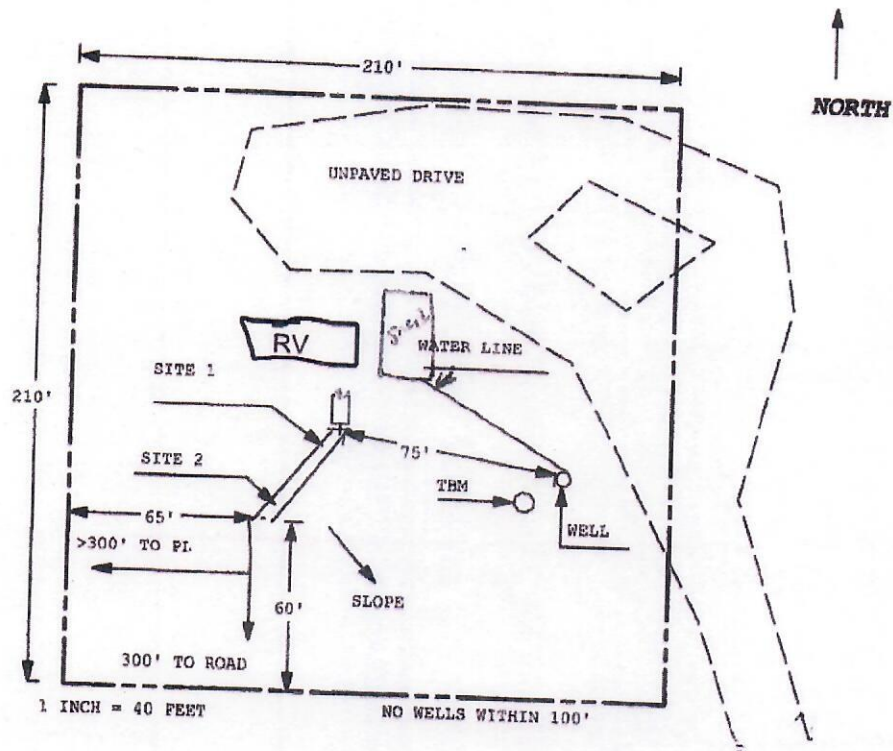
Date 1-9-25

Cepher
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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25-0018



James Warren
1-9-25