Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis Governor

Joseph A. Ladapo, MD, PhD State Surgeon General

Vision: To be the Healthiest State in the Nation

December 08, 2023

BRODY PACK 5683 153RD Live Oak, FL 32060

RE: Contingency Letter

Application Document No: AP2024393 Centrax Permit Number: 12-SC-2828128

OSTDS Number: RICHHARD BIAS 3690 SW ICHETUCKNEE Lake City, FL 32024

Lot:2

Block:

Subdivision: Flatt S/D Unrec

Dear Applicant:

This will acknowledge receipt of an application dated 11/30/2023 for a permit to use an existing onsite sewage treatment and disposal system located on the above referenced property.

From a review of your completed application, it has been determined that your existing system appears to meet the minimum standards of F.A.C. 62-6 for the proposed use. It is approved for use with the plans submitted to this office. If this system should fail, causing an unsanitary condition to exist, steps must be taken to bring the system into compliance immediately. Department approval of the 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 approval requires the applicant to modify the permit application. Such modification may result in this approval being made null and void. Issuance of this approval does not exempt the applicant from compliance with other Federal, State, or Local Permitting required for development of this property.

If you have any questions on this matter, please call our office at (386) 785-1058.

Sincerely,

Dustin Jones, Environmental Specialist II

Enclosures

CC:

SW Ichetucknee Ave-Existing Driveway 840. Existing Well 99X91 .197

Flatt Subdivision Lot 2

Richard E. Bias 3690 SW Ichetucknee Ave Lake City, FL Parcel: 25-5S-15-00479-102



STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT Permit Application Number_	23-0808
PART II - SITEPLAN	
Scale: Each block represents 10 feet and 1 inch = 40 feet.	



Notes:			
		Ceasil	e las d
		3(604)	
			# 100 g
Site Plan submitted by: Brody Pack			
Plan Approved	Not Approved	_ /	Date 2 8 22
Ву		Coley	County Health Department
ALL CHANCES MUST DE	A POPOVED DV THE COL	INITALITA DE	
ALLEHANGES MOST BE	E APPROVED BY THE COU	INTY HEALTH DE	PARIMENT

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

Incorporated: 62-6.004, F.A.C.



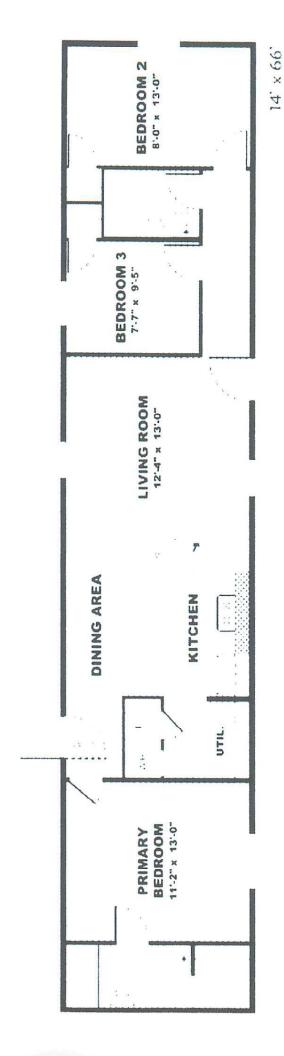
STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM (OSTDS)

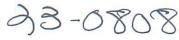
APPLICATION FOR CONSTRUCTION PERMIT

[]	CATION FOR: New System [x] E Repair [] A	xisting Syst bandonment	em [] Holding	Tank [] Innovative
APPLIC					EMAIL: _	nfpermitting@icloud.com 503-689-6563
MAILI	6470 147th F	Road Live Oal	k, FL 			
BY A PARTIC	COMPLETED BY APPLICANT PERSON LICENSED PURSUAN CANT'S RESPONSIBILITY T ED (MM/DD/YY) IF REQUES	T TO 489.105 O PROVIDE DO	(3) (m) OR 4 CUMENTATION	189.552, FLO N OF THE DAT	RIDA STA	TUTES. IT IS THE T WAS CREATED OR
	RTY INFORMATION					TION PLAN? [Y/N]
LOT:	2 BLOCK: s	UBDIVISION:	Flatt		e and the same of	PLATTED: Yes
PROPER	25-5S-15-0047	9-102	ZONING:	I,	M OR EQU	VIVALENT: [Y/N]
PROPER	RTY SIZE: 5.04 ACRES	WATER SUPPLY	: [×] PRI	VATE PUBLIC	[]<=2	000GPD []>2000GPD
IS SEW	ER AVAILABLE AS PER 38	1.0065, FS?	[Y/N]	1	DISTANCE	TO SEWER: FT
PROPER	RTY ADDRESS: 3690 SW IC	hetucknee Av	e Lake City	, FL		
DIRECTIONS TO PROPERTY: See Attached						
BUILDI	ING INFORMATION	[x] RESID	ENTIAL	[] COM	MERCIAL	
Unit	Type of Establishment	No. of Bedrooms		Commercial/ Table I, Ch		ional System Design -6, FAC
1	Old Home	3	924	1.		attached
2	New Home	2	979	1		
3						
4		-				
[]	Floor/Equipment Drains	[] Othe	er (Specify	·)		
SIGNAT	TURE:				DATE:	11/28/23

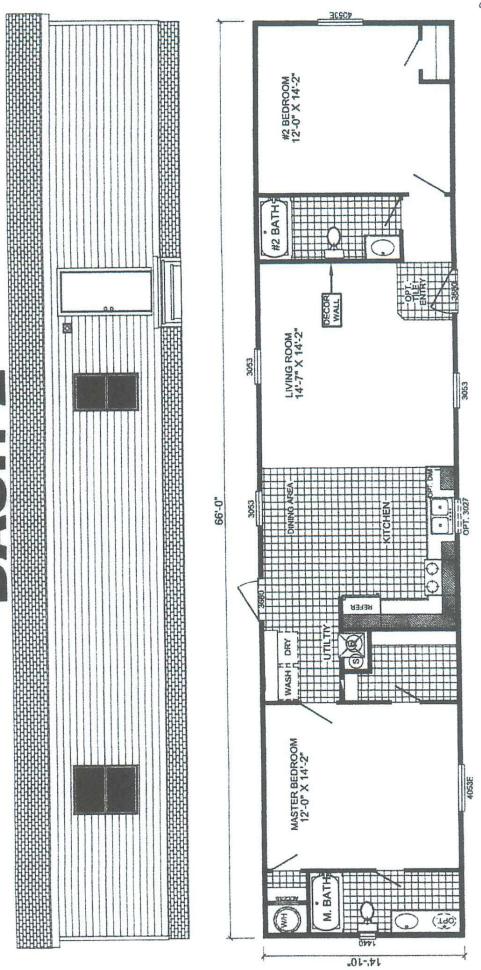
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) Incorporated 62-6.004, FAC











X-5662B - RUNNER

2 BEDROOM / 2-BATH

16 X 70 - Approx. 979 Sq. Ft.

Date: 11/20/19

* All room dimensions include closets and square footage figures are approximate. * Live Oak Homes reserves the right to modify product offering at any time.

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EXISTING SYSTEM WORKSHEET

EXISTING RESIDENCE ADDITION			
I am proposing an <u>addition</u> to my current residence that <u>does not include a badroom</u>	Yes	No_X	
2. I am proposing the addition of a bedroom (s)	Yes	No_X	
3. I have submitted floor plans of the <u>existing</u> structure and the <u>proposed</u> structure	Yes	No_X	
REPLACING A HOME			
How many bedrooms are in the existing or previous	ous home	.3	
2. How many bedrooms are in the proposed home			
3. I have submitted floor plans of existing or previous home and the proposed home Yes _X No			
POWER TO EXISTING STRUCTURE	Yes_X_		
ADDITION OF POOL	Yes		
ADDITION OF MISC BUILDING (S)	YesWit	h bathroom	
Please sign below to verify the above submitted information.			
Signature: Environmental Nealth 135 NE Respando St. Lake City FL OWNIE 16-758-1058		re:11/28/23_	
FAX: 386-758-2187			