

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

APPLICATION FOR:	1			_
[New System [Repair [1 Abandonment	[] Holding	Tank []	Innovative
() Repair () Abandonment	[] Tempora	ITY []	
APPLICANT: Jordan and Bo	nnie Green			
AGENT: ROCKY FORD, A & B	CONSTRUCTION		TELEPHONE	E: 386-497-2311
MAILING ADDRESS: 546 SW	Dortah Street Em WHITE	E EI 22020		
MILLING ADDRESS. 540 SW	Dorton Street, Fr. Whir	E, PL, 32038		
TO BE COMPLETED BY APPLI BY A PERSON LICENSED PUR APPLICANT'S RESPONSIBILI PLATTED (MM/DD/YY) IF RE	CANT OR APPLICANT'S AUT RSUANT TO 489.105(3)(m) TTY TO PROVIDE DOCUMENTA	CHORIZED AGENT. OR 489.552, FI TION OF THE DA OF STATUTORY G	LORIDA STATUT ATE THE LOT W GRANDFATHER P	TES. IT IS THE TAS CREATED OR PROVISIONS.
PROPERTY INFORMATION				
LOT: NA BLOCK: NA	SUB: NA			PLATTED:
PROPERTY ID #: 07-3S-16	-02029-014 zo	NING:	I/M OR EQUIT	VALENT: [Y/N]
PROPERTY SIZE: 10.33.AC	RES WATER SUPPLY: [\]	PRIVATE PUBL	IC []<=200	OGPD []>2000GPD
IS SEWER AVAILABLE AS PE	R 381.0065, FS? [Y / N)1	DISTANCE TO	SEWER: MA_FT
PROPERTY ADDRESS: 620 N	W Evergreen Ponds Ct,	Lake City, F	1	
DIRECTIONS TO PROPERTY:	TR onto NW	Lake J	effer	Rd, TL
	000, TR onto			
	oad all the			
BUILDING INFORMATION			, ,	3.
Unit Type of No Establishment		Commercial Table 1, C	/Institution	al System Design , FAC
SF Residential_2	4 385	12		
3				
[] Floor/Equipment Dr	ains [] Other (Spec	cify)		
	11.			4/8/2022

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Chica	010		Permit Ap	plication Num	ber 00 - 00	040
Gre	ul	PART II - SITER	LAN		alo	1
Scale: 1 inch = 40 feet.	professional designation of the state of					121
lacre of 10.	N	PRIVE C		O)		
	W	23 mir	2 story 102 3812	55		A construction of the cons
					BN	Action the coldinary of the particular and the coldinary of the coldinary
				of		
Notes:		0 10000				
	lacre o	f 10.33				
Site Plan submitted by:	William	D. Bishop II		<u>N</u>	MASTER CONTRACT	FOR
Plan Approved		Not Approved_			00101_0	2
By	NGES MUST RE	APPROVED BY TH	E COUNTY	Columbia HEALTH DE	County Health Dep	artment

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6,001, FAC (Stock Number: 5744-002-4015-6)



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

PERMIT #: 12-SC-2500503

APPLICATION #: AP1829522

DATE PAID: 4/20/22

FEE PAID: 31000

RECEIPT #:____

DOCUMENT #: PR1762863

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: JORDAN**22-0348 GREEN	
PROPERTY ADDRESS: 620 NW EVERGREEN PONDS Lake City, FL 32055	
COT: BLOCK: SUBDIVISION:	i la filosofici
PROPERTY ID #: 02029-014 [SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	EL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARD S	MATERIAL FACTS TO MODIFY THE NULL AND VOID
SYSTEM DESIGN AND SPECIFICATIONS	
[1,200] GALLONS / GPD New Multi-Chambered Septic CAPACITY	
[] GALLONS / GPD N/A CAPACITY	
[] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLO	
[] GALLONS DOSING TANK CAPACITY []GALLONS @[]DOSES PER 24 HRS	#Pumps [
[575] SQUARE FEET Drainfield SYSTEM	
R [] SQUARE FEETN/A SYSTEM	
TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []	
CONFIGURATION: [X] TRENCH [] BED []	
LOCATION OF BENCHMARK: Naik in oak E of site	
ELEVATION OF PROPOSED SYSTEM SITE [12.00] [INCHES FT] [ABOVE BELOW BENCHMARK/RE	FERENCE POINT
BOTTOM OF DRAINFIELD TO BE [32.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/RE	
[32.00] [INCHES] FI] [ABOVE / BELOW] BENCHMARK/RE	FERENCE POINT
FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] INCHES	
The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated 460 gpd.	flow of
400 gpd.	
	1
PECIFICATIONS BY: William D Bishop II TITLE: Master Septic Contractor	
PPROVED BY:	Columbia CHD
ATE ISSUED: 05/02/2022 EXPIRATION DATE:	11/02/2023
H 4016, 08/09 (Obsoletes all previous editions which may not be used)	
ncorporated: 64E-6 003 FAC	Page 1 of 3