

1250'

654'

Driveway

134'

New Home

140'

Well

100'

60'

15 25
MB
at the

490'



Columbia County Health Department
217 NE Franklin St Lake City, FL 32055

PAYING ON: # 12-SC-2414656 BILL DOC # 12-BID-5665727 CONSTRUCTION APPLICATION #: AP1760431
RECEIVED FROM: AMERICA'S HOME PLACE AMOUNT PAID: \$ 425.00
PAYMENT FORM: CHECK 044041 PAYMENT DATE: 10/28/2021

MAIL TO: DYLAN**21-0895 TOWNSEND

FACILITY NAME : _____

PROPERTY LOCATION:

TO BE DETERMINED
Lake City, FL 32024

Lot: _____ Block: _____

Property ID: 04298-008

EXPLANATION or DESCRIPTION:	QUANTITY	FEE
128 - OSTDS Construction System Inspection Research Fee	1	\$ 5.00
-1 - COUNTY FEE 1 (OSTDS)	1	\$ 25.00
-1 - OSTDS Construction Application and Plan Review, New	1	\$ 100.00
123 - OSTDS Construction Site Evaluation	1	\$ 115.00
126 - OSTDS Construction Permit (New or Mod, Amendment)	1	\$ 55.00
127 - OSTDS Construction System Inspection	1	\$ 75.00
133 - OSTDS Construction Reinspection	1	\$ 50.00

RECEIVED BY: MobleySJ

AUDIT CONTROL NO. 12-PID-5332310

Note: AMERICA'S HM PL/21-0895

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 21-0895

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

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

See Attached

Notes: _____

Site Plan submitted by: Alex Boy

Plan Approved ☒ Not Approved _____ Date 11/10/21

By [Signature] Columbo County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

FW

580 312 107524



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

PERMIT NO. 21-8895
DATE PAID: 10/28/21
FEE PAID: 435.00
RECEIPT #: 1760431

APPLICATION FOR:

☒ New System
☐ Repair

☐ Existing System
☐ Abandonment

☐ Holding Tank
☐ Temporary

☐ Innovative

APPLICANT: Dylan & Janna TownsendAGENT: Alex Locay - Americas Home PlaceTELEPHONE: 352-244-8247MAILING ADDRESS: 9200 NW 39th Ave, Gainesville, FL 32606

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

STR-23-75-16

LOT: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 23-75-16-04298-008 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ NPROPERTY SIZE: 9.55 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N

DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: TBD 4325 W Dan Cook Way 32648DIRECTIONS TO PROPERTY: See Attached

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

SFR

3

Heated 1832
Total 2014

2

3

4

☐ Floor/Equipment Drains☐ Other (Specify) _____SIGNATURE: DylanDATE: 10/18/2021



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

PERMIT #: 12-SC-2414656
APPLICATION #: AP1760431
DATE PAID: 10/28/21
FEE PAID: 425.00
RECEIPT #: _____
DOCUMENT #: PR1689885

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: DYLAN**21-0895 TOWNSEND

PROPERTY ADDRESS: TO BE DETERMINED Lake City, FL 32024

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 04298-008 [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 Septic Tank 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 []

F LOCATION OF BENCHMARK: Stake by Drainfield.

I ELEVATION OF PROPOSED SYSTEM SITE [13.00] INCHES FT [] ABOVE BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [43.00] INCHES FT [] ABOVE BELOW BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O 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.

T

H

E

R

SPECIFICATIONS BY: Dustin W Jones TITLE: Environmental Specialist II

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

DATE ISSUED: 11/16/2021 EXPIRATION DATE: 05/16/2023

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