



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

Released  
7/17/2025  
MG

PERMIT NO. 25-0739  
DATE PAID: 7/17/2025  
FEE PAID: \$55.00  
RECEIPT #: 2007421

4/12/15 \$55.00 Amend

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System       Existing System       Holding Tank       Innovative  
 Repair       Abandonment       Temporary     

APPLICANT: Kathie V. DuPree

EMAIL: Kathie\_dupree@yahoo.com

AGENT: \_\_\_\_\_

TELEPHONE: 904-708-4149

MAILING ADDRESS: 220 NW Testament Ct.

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: 2 BLOCK: \_\_\_\_\_ SUBDIVISION: Josephine Acres Unit PLATTED: \_\_\_\_\_

PROPERTY ID #: 31-25-17-04807-102 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 10 ACRES WATER SUPPLY: [ X ] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ X ] / N ] DISTANCE TO SEWER: 50 FT

PROPERTY ADDRESS: 220 NW Testament Ct. Lake City, FL 32055

DIRECTIONS TO PROPERTY: Take 441 N, TL on Josephine, TL on NW Testament, first driveway on right

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
1	<u>RV</u>		<u>288</u>	
2				
3				
4				

**REVISED**  
6/21/2025 EH

[ ] Floor/Equipment Drains [ ] Other (Specify) \_\_\_\_\_

SIGNATURE: Kathie V. DuPree

DATE: 06/21/2025

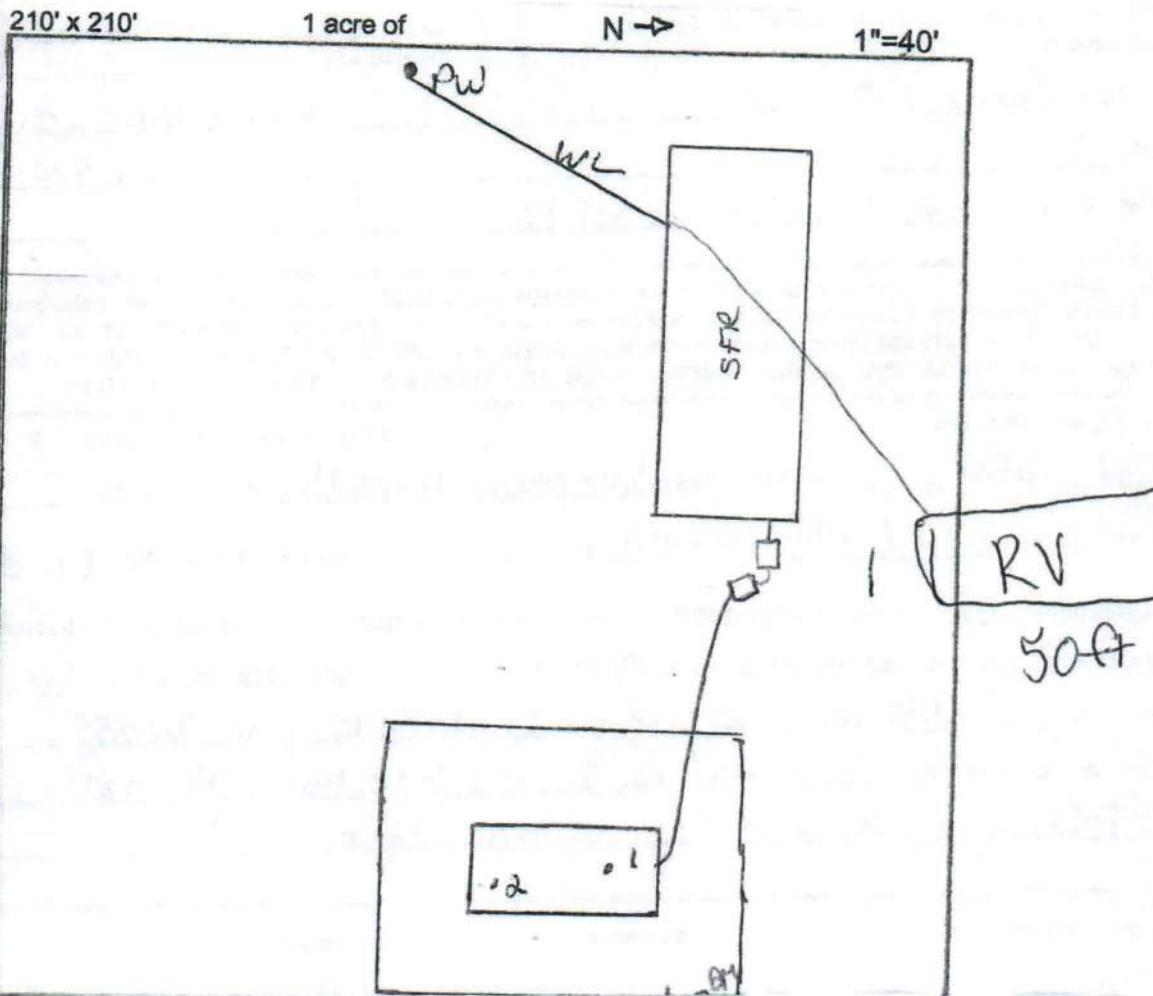
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

Incorporated 62-6.004, FAC

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

PART II - SITEPLAN



Site Plan submitted by:

*Kathryn V. DuPree*

Plan Approved \_\_\_\_\_

By \_\_\_\_\_

Not Approved \_\_\_\_\_

*Columbia*

Date 6/23/25

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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Incorporated: 62-6 004 F.A.C.