



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

PERMIT #: 12-SC-2760363
APPLICATION #: AP1980444
DATE PAID: 7-28-23
FEE PAID: 310.00
RECEIPT #: _____
DOCUMENT #: PR1980929

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: CORNERSTONE**23-0556 DEVELOPMENT
PROPERTY ADDRESS: 128 SW KING ARTHURS Lake City, FL 32024
LOT: 10 BLOCK: _____ SUBDIVISION: Stonehenge Ph-2
PROPERTY ID #: 03099-210 [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 [400] GALLONS / GPD Aerobic Unit 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 [282] SQUARE FEET drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM
A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [X] TRENCH [] BED []
N
F LOCATION OF BENCHMARK: Nail in 10" oak tree W of system site
I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES] FT [] ABOVE / BELOW BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [42.00] [INCHES] FT [] ABOVE / BELOW BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] INCHES

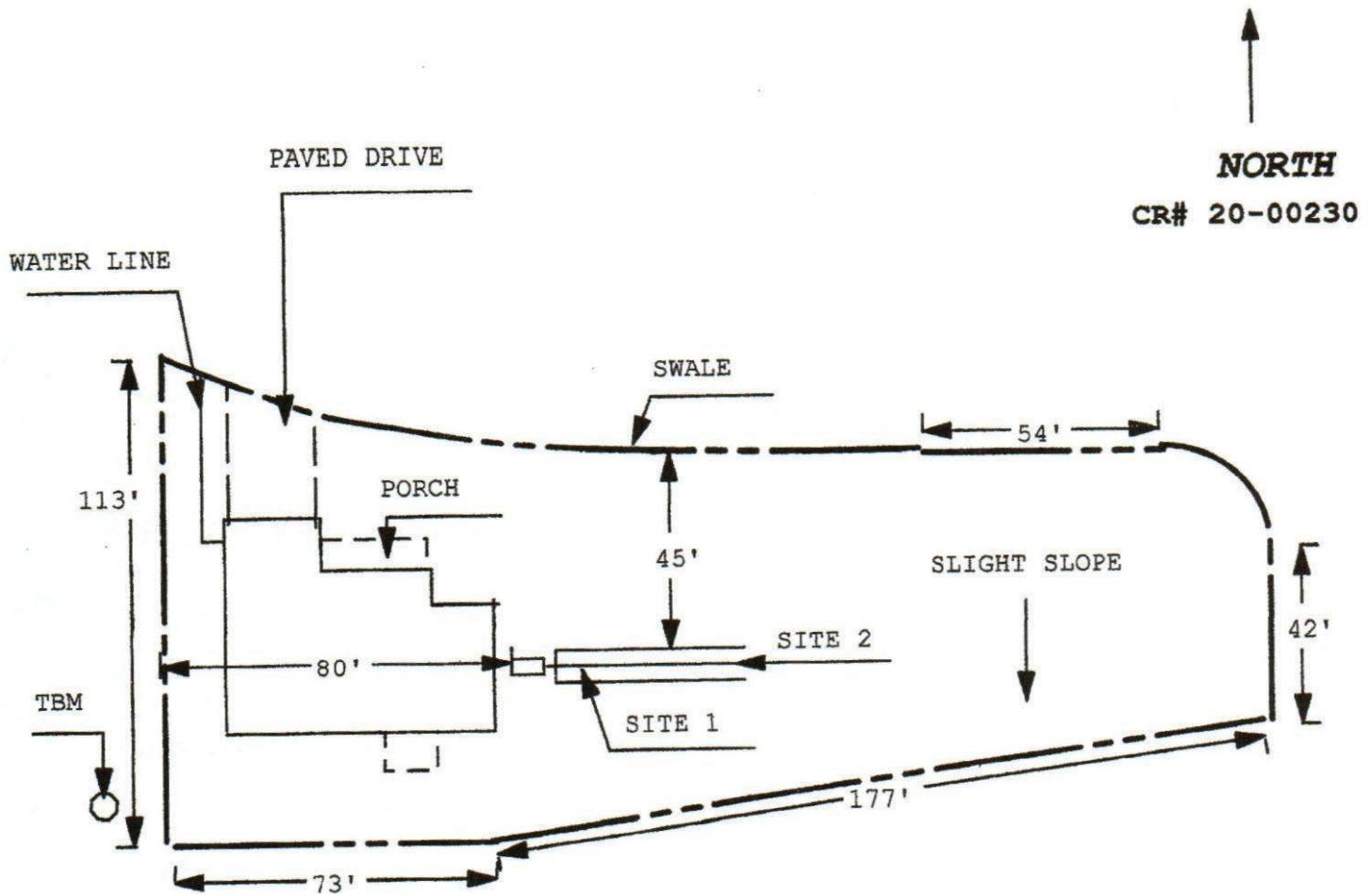
O 50% ATU Nitrogen-reducing system to be installed to comply with current spring BMAP requirements
T Nitrogen-reducing NSF-245 certified aerobic treatment unit required. Operating permit and maintenance agreement
H required.

SPECIFICATIONS BY: PAUL LLOYD TITLE: PSE
APPROVED BY: Sallie A Ford TITLE: Environmental Health Director Columbia CHD
DATE ISSUED: 07/28/2023 EXPIRATION DATE: 01/28/2025

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

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 23-0550

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



1 INCH = 40 FEET

NO WELLS WITHIN 100'

Site Plan Submitted By Paul R. Rupp Date 5/5/23
Plan Approved ☒ Not Approved ☐ Date 7/28/23
By Sallie Ford EH Director Columbia CPHU

Notes: _____

X Chris W. Co



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

CR # 20-00230

PERMIT NO. 23-0556
DATE PAID: 12-22
FEE PAID: 310.24
RECEIPT #: 1980444

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: CORNERSTONE DEVELOPEMENT

AGENT: CHRIS COX

TELEPHONE: (386) 292-2076

MAILING ADDRESS: 180 NW AMENITY COURT

LAKE CITY

FL 32055

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

LOT: 10 BLOCK: N/A SUBDIVISION: STONEHENGE PHASE 2 PLATTED: _____

PROPERTY ID #: 23-4S-16-03099-210 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 0.510 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 128 SW KING ARTHURS GLENN LAKE CITY

DIRECTIONS TO PROPERTY: TAKE 90 WEST. TURN LEFT ON SISTERS WELCOME ROAD. CROSS OVER I-75. TURN RIGHT ON SOUTHWEST SSTONEHENGE LANE. TURN RIGHT ON GUINEVERE WAY. TURN LEFT ON KING ARTHURS GLENN. SITE ON LEFT.

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 62-6, FAC
1	HOUSE	3	1,972	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Chris Cox

DATE: 7/28/23

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