



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

| PERMIT NO. | 2040054 |
|--------------|---------|
| DATE PAID: | LIBELL! |
| FEE PAID: | \$10.00 |
| RECEIPT #: / | 462197 |

| APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary [] |
|---|
| APPLICANT: D & G Properties of Columbia County LLC |
| AGENT: ROCKY FORD, A & B CONSTRUCTION TELEPHONE: 386-497-2311 |
| MAILING ADDRESS: 546 SW Dortch Street, FT. WHITE, FL, 32038 |
| 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: 18 BLOCK: NA SUB: Star Lake Estates PLATTED: 5/23/03 |
| PROPERTY ID #: 28-3S-16-02372-068 ZONING: DeS I/M OR EQUIVALENT: [Y / ©] |
| PROPERTY SIZE: 0.5 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC []<=2000GPD []>2000GPD |
| IS SEWER AVAILABLE AS PER 381.0065, FS? [Y N)] DISTANCE TO SEWER: NA FT |
| PROPERTY ADDRESS: NW Mercury Ct, Lake City, Fl |
| DIRECTIONS TO PROPERTY: Head Won NE Franklin St, TL onto NW |
| main Blvd, TR onto US-90W. TR onto NW Brown Rd. TI |
| onto NW star Lake PI, IR onto NW SUIVI Dr. TR onto NW |
| BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL CH. |
| Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC |
| sf Residential 4 2005 |
| 2 |
| 3 |
| [] Floor/Equipment Drains [] Other (Specify) |
| SIGNATURE: William A Biologo II DATE: 1/17/2020 |
| DK 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC Page 1 of 4 |



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

| PERMIT #: 12 | 2-SC-2032221 |
|------------------|--------------|
| APPLICATION #: A | P1463197 |
| DATE PAID: | 1/22/20 |
| FEE PAID: | 310.00 |
| RECEIPT #: | |
| DOCUMENT #: PI | R1290345 |

| CONSTRUCTION | PERMIT FOR: | OSTDS New | | | |
|--|---|--|---|--|--|
| APPLICANT: | D&G **20-0054 PI | ROPERTIES OF COL CO | LC | W | |
| PROPERTY ADDR | ESS: NW ME | RCURY Ct Lake City, | FL 32055 | | |
| LOT: <u>18</u> | BLOCK: | | BDIVISION: 5 | Star Lake Estates | |
| PROPERTY ID # | : 02372-068 | | | [SECTION, TOWNSHIP, RANGE, PA [OR TAX ID NUMBER] | RCEL NUMBER) |
| SATISFACTORY WHICH SERVED PERMIT APPLI ISSUANCE OF | S., AND CHAP PERFORMANCE AS A BASI: CATION. SUC THIS PERMIT | PTER 64E-6, F.A.C FOR ANY SPECIFIC S FOR ISSUANCE (| C PERIOD (OF THIS PE OAY RESULT T THE APP | RMIT, REQUIRE THE APPLICAN IN THIS PERMIT BEING MADE LICANT FROM COMPLIANCE WITH | MATERIAL FACTS, T TO MODIFY THE |
| T [1,050] A [] N [] K [] D [500] R [] | GALLONS / GPI GALLONS GREASE GALLONS DOSING SQUARE FEET SQUARE FEET | New Multi-Cham N/A INTERCEPTOR CAPACITY Drainfield N/A | TY [MAXIMUM []GALI SYSTEM SYSTEM | CAPACITY CAPACITY SINGLE TANK:1250 GAI LONS @[]DOSES PER 24 HRS | #Pumps [] |
| A TYPE SYSTEM: CONFIGURATION | [X] STA | NDARD [] FTT.T. | PD [1 34 | [] | |
| | | Nail in sweet gum tree NE | | | |
| ELEVATION OF | PROPOSED SYST | TEM SITE [19.0 | 0] [INCHES | FT] [ABOVE BELOW BENCHMARK/I | EFERENCE POINT |
| FILL REQUIRE | D: [0.00] | INCHES EXCA | VATION REQUI | RED: [] INCHES | |
| 400 gpd. | sized for 4 bedroo | ms with a maximum occu | pancy of 8 pers | ons (2 per bedroom), for a total estimate | ed flow of |
| (| | | | | |
| 911 adde | ess wery eiro | ol . | | | 1 |
| PECIFICATIONS | | D Bishop II | TI | TLE: | |
| PPROVED BY: | Jun of | TITLE | | TLE: Master Septic Contractor al Specialist I | Columbia CHD |
| ATE ISSUED: | 01/28/202 | Name of the last o | | EXPIRATION DATE: | 07/28/2021 |
| H 4016, 08/09 ncorporated: | (Obsoletes all 64E-6.003, FAC | l previous editions | which may n | | Page 1 of 3 |
| | | v 1.1.4 | AP1463197 | 821239811 | ************************************** |

Color

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

BY G Propurius of Col. Co. LLC

Permit Application Number Permit Application Number_ PART II - SITEPLAN -----Scale: 1 inch = 40 feet. Notes: Site Plan submitted by: MASTER CONTRACTOR Plan Approved Not Approved County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT