



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

CR # 24-00128

PERMIT NO. 24-0385
DATE PAID: 5/8/24
FEE PAID: 310.00
RECEIPT #: 2069651

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: TAYLOR GARCIA

EMAIL: don@dlcandr.com

AGENT: DON LITTLE CONSTRUCTION & ROOFING INC.

TELEPHONE: (386) 699-1246

MAILING ADDRESS: PO BOX 225A

LAKE CITY FL 32056

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: 13 BLOCK: N/A SUBDIVISION: RIVERS MANOR PLATTED: _____

PROPERTY ID #: 01-05S-16-03401-113 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☒

PROPERTY SIZE: 4.010 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

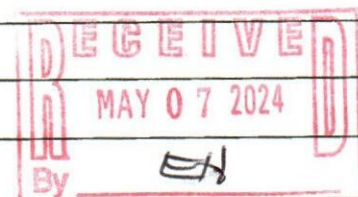
IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☒ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: BLAYLOCK CT.

DIRECTIONS TO PROPERTY: TAKE SR 47 SOUTH PAST I-75. TURN LEFT ON WALTER AVE. TURN LEFT ON LITTLE RD. TURN RIGHT ON BLAYLOCK 1ST 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	<u>HOUSE</u>	<u>4</u>	<u>2,725</u>	
2	<u>Storage Building (24x40 and 12x20 lean to)</u>	<u>0</u>	<u>1248</u>	
3				
4				



☐ Floor/Equipment Drains ☐ Other (Specify) _____

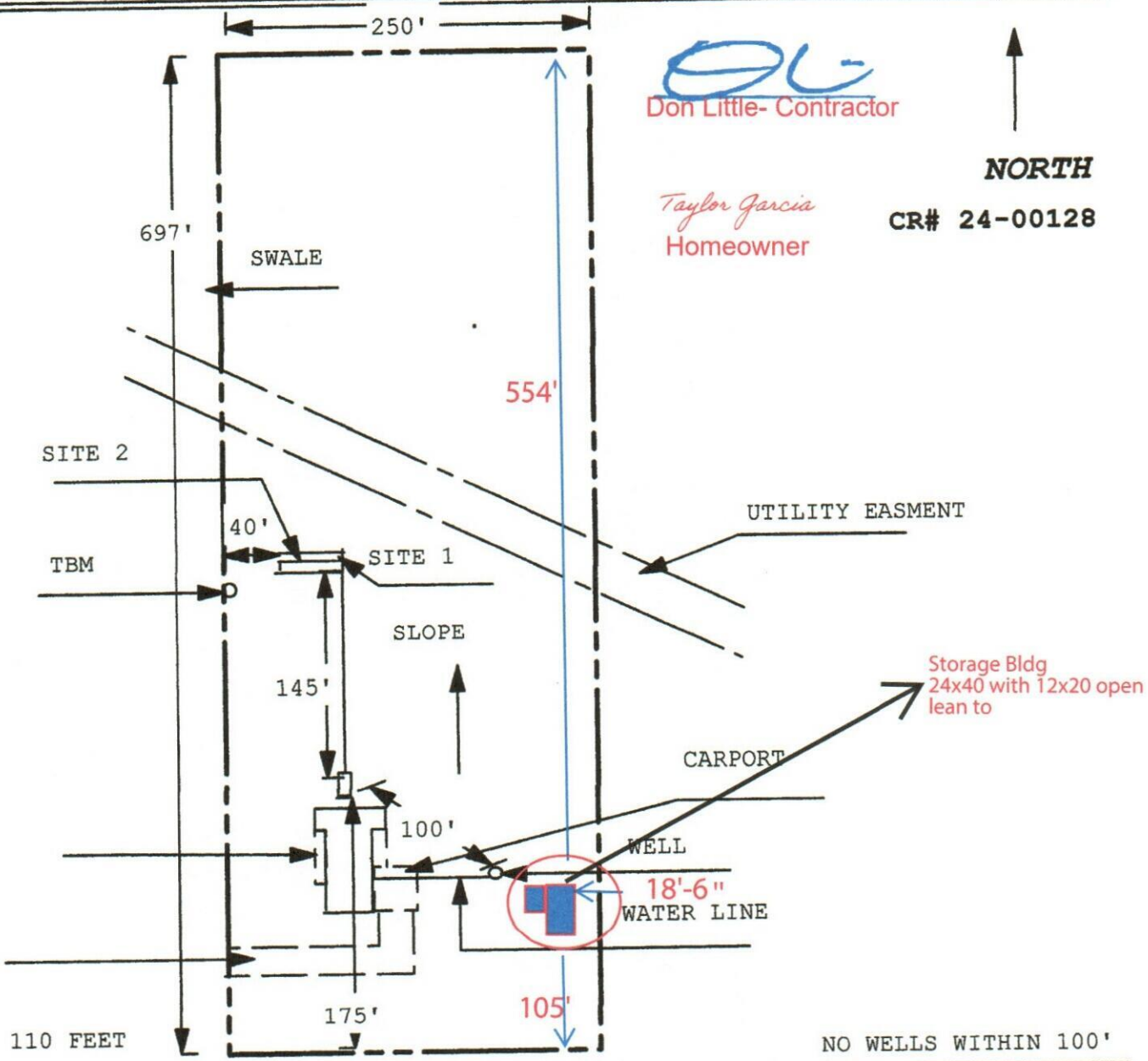
SIGNATURE: [Signature]

Taylor Garcia

DATE: 4.30.24

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 24-0885

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. [Signature] Date 4/21/24
Plan Approved ✓ Not Approved _____ Date 5/10/24
By [Signature] 652 Columbia CPHU
Notes: _____



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

PERMIT #: **12-SC-2898771**
APPLICATION #: **AP2069651**
DATE PAID: **5/8/24**
FEE PAID: **310.00**
RECEIPT #:
DOCUMENT #: **PR2082694**

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: TAYLOR**24-0385 GARCIA
PROPERTY ADDRESS: BLAYLOCK Lake City, FL 32025
LOT: 13 BLOCK: SUBDIVISION: River Manor U-1
PROPERTY ID #: 03401-113 [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 [1,050] GALLONS / GPD New Multi-Chambered Septic 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 [500] 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: Nail in power pole west of system site

I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [44.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] 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 400 gpd.

T Drainfield 145' north of septic tank

H
E
R

SPECIFICATIONS BY: PAUL LLOYD TITLE: PSE

APPROVED BY: Sean P Havens TITLE: Environmental Specialist I Columbia CHD

DATE ISSUED: 05/10/2024 EXPIRATION DATE: 11/10/2025

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

KR