

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

PERMIT #: 12-SC-2191127
APPLICATION #: AP1588457

DATE PAID: 10/30/20

FEE PAID: 31000

RECEIPT #:____

DOCUMENT #: PR1456616

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: KAYLA**20-0868 LAMONDA	
PROPERTY ADDRESS: SW NAUTILUS Lake City, FL 32024	
LOT: BLOCK: SUBDIVISION:	
PROPERTY ID #: 03701-000 [SECTION, OR TAX II	TOWNSHIP, RANGE, PARCEL NUMBER] D NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFIC 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPR SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, RECEPTION APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.	OVAL OF SYSTEM DOES NOT GUARANTEE ANY CHANGE IN MATERIAL FACTS, QUIRE THE APPLICANT TO MODIFY THE PERMIT BEING MADE NULL AND VOID. ROM COMPLIANCE WITH OTHER FEDERAL,
SYSTEM DESIGN AND SPECIFICATIONS	
T [900] GALLONS / GPD Septic Tank CAPACIT A [] GALLONS / GPD N/A CAPACIT N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY K [] GALLONS DOSING TANK CAPACITY []GALLONS & [SINGLE TANK:1250 GALLONS]
D [375] SQUARE FEET Drainfield (LR 8 SL) SYSTEM R [] SQUARE FEET N/A SYSTEM A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND [I CONFIGURATION: [X] TRENCH [] BED []	1
F LOCATION OF BENCHMARK: Nail in oak E. of site.	
I ELEVATION OF PROPOSED SYSTEM SITE [12.00] [INCHES FT] [ABO E BOTTOM OF DRAINFIELD TO BE [40.00] [INCHES FT] [ABO L	
D FILL REQUIRED: [0 00] INCHES EXCAVATION REQUIRED: [0 00] The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bit 300 gpd.	
Н	
R R	
SPECIFICATIONS BY: Rocky D Ford TITLE:	Contract
APPROVED BY: TITLE: Environmental Spec	ialist II Columbia CHD
Dustin W Jones 11/02/2020	EXPIRATION DATE: 05/02/2022
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AP1589457

V 1.1.4

SE1414725



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

PERMIT NO. 30-3848

DATE PAID: 10 30 30

FEE PAID: 310.00

RECEIPT #: 1588457

APPLICATION FOR: [\(\) New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Kayla Lamonda
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: NA BLOCK: NA SUB: NA PLATTED:
PROPERTY ID #: 24-5s-16-03701-000 ZONING: I/M OR EQUIVALENT: [Y N]
PROPERTY SIZE: 1 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: SW Nautilus Rd, Lake City, Fl 32024
DIRECTIONS TO PROPERTY: Head Won NE Franklin St, TL on to
US-4418, TL onto US-413, TR onto SW Tustenuggee AL
TR onto SN Nautius Rd.
BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
SF Residential MH 3 1456
3
[] Floor/Equipment Drains [] Other (Specify) SIGNATURE: DATE: 10/28/2020

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STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 20 - 0868

Scale: 1 inch = 40 feet	PART II - SITEPLAN	
Scale: 1 inch = 40 feet.	310'	op op
	3 BR 38 x 600 145 ys S	21
	nea & ac	slope
Notes:	2	utitus Ra
Site Plan submitted by:	ly D7 0	MASTER CONTRACTOR Date 10-28-20

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)