



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

PERMIT NO. 23-0378  
DATE PAID: 5/18/23  
FEE PAID: 310.00  
RECEIPT #: AP190607

APPLICATION FOR:

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

APPLICANT: PAT HATFIELD

AGENT: Sam MARTORANA / DBA EllaMia LLC TELEPHONE: 352-390-4219

MAILING ADDRESS: 620 E Inverness Blvd Inverness FL 34452 ellamia11c@gmail.com

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: 21 BLOCK:        SUBDIVISION: Hills TOSTENUGGEE PLATTED:         
(35457)

PROPERTY ID #: 08-69-17-D9626-121 ZONING:        I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 5.21 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ No ☐ Yes DISTANCE TO SEWER:        FT

PROPERTY ADDRESS: TBD SW Newray Cir, Ft White

DIRECTIONS TO PROPERTY: See Map

BUILDING INFORMATION

☒ RESIDENTIAL

☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	SFR MH	3	1140	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)       

SIGNATURE: [Signature] DATE: 5/18/23



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

E-MAILED  
jeff

PERMIT #: 12-SC-2709257  
APPLICATION #: AP1966607  
DATE PAID: 5.18.23  
FEE PAID: 310.00  
RECEIPT #:  
DOCUMENT #: PR1939670

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: Patricia\*\*23-0378 Hatfield  
PROPERTY ADDRESS: TBD SW Newton Cir Fort White, FL 32038  
LOT: 21 BLOCK: SUBDIVISION: Tustenuggee Hills  
PROPERTY ID #: 09626-121 [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 [ 900 ] GALLONS / GPD Septic Tank 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 [ 375 ] 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 oak left of DF  
I ELEVATION OF PROPOSED SYSTEM SITE [ 22.00 ] [ INCHES ] FT [ ] ABOVE / BELOW BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 52.00 ] [ INCHES ] FT [ ] ABOVE / BELOW BENCHMARK/REFERENCE POINT  
L  
D FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [ 0.00 ] INCHES

O  
T  
H  
E  
R  
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.

SPECIFICATIONS BY: Jeff Hardee TITLE: CEHP  
APPROVED BY: Cassandra Bonds TITLE: Environmental Specialist I Columbia CHD  
DATE ISSUED: 05/23/2023 EXPIRATION DATE: 11/23/2024  
DH 4016, 08/09 (Obsoletes all previous editions which may not be used)  
Incorporated: 64E-6.003, FAC



23-0378

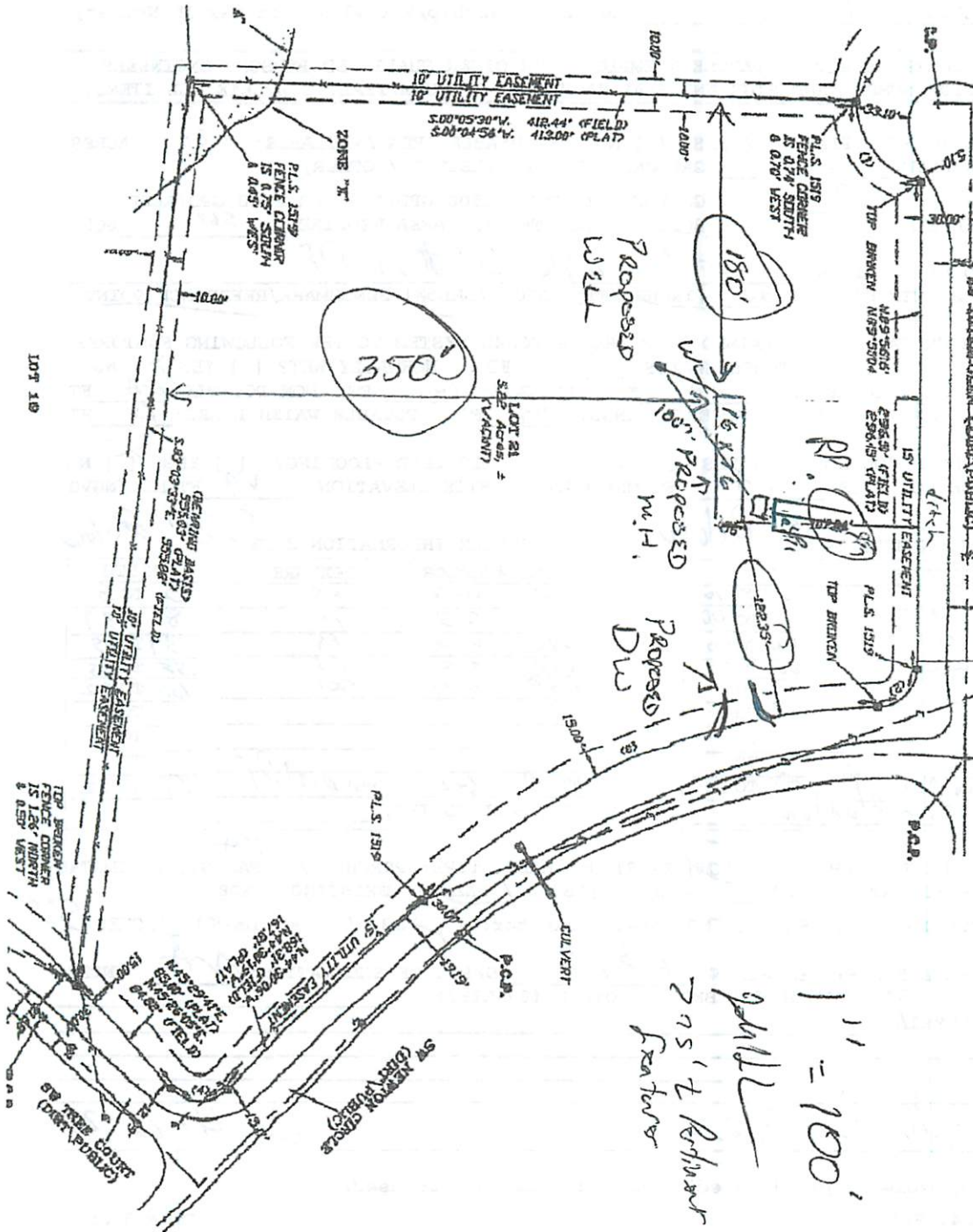


*[Signature]*  
5/15/25

HATFIELD

08-6S-17-09626-121

(35457)



1" = 100'  
*[Signature]*  
7/5/2 Refractor  
features