



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

PERMIT NO. 23-0678  
DATE PAID: 9/24/23  
FEE PAID: 60.00  
RECEIPT #: 2001896

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Curtis Stamper EMAIL: csstamper2006@windstream.net

AGENT: NA TELEPHONE: 352-359-2795

MAILING ADDRESS: P.O. Box 462, High Springs, FL 32655

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: 1748 BLOCK: \_\_\_\_\_ SUBDIVISION: Sassafras AC PLATTED: \_\_\_\_\_

PROPERTY ID #: 810068-018 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☒ Y ☐ N

307917-10068-018

PROPERTY SIZE: \_\_\_\_\_ ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 823 SW CR 138 Ft White, FL

DIRECTIONS TO PROPERTY: Hwy 441 to CR 778, turn right to 778, go to Hwy 97, Turn left, go to CR 138 turn right. go about 3/4 mile property on right

BUILDING INFORMATION

☒ RESIDENTIAL

☐ COMMERCIAL

| Unit No. | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table I, Chapter 62-6, FAC |
|----------|-----------------------|-----------------|--------------------|-------------------------------------------------------------------|
| 1        | <u>Pole Barn</u>      | <u>—</u>        | <u>40x60</u>       | <u>ORIGINAL ATTACHED</u>                                          |
| 2        | _____                 | _____           | _____              | _____                                                             |
| 3        | _____                 | _____           | _____              | _____                                                             |
| 4        | _____                 | _____           | _____              | _____                                                             |

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: [Signature] DATE: 9-25-23



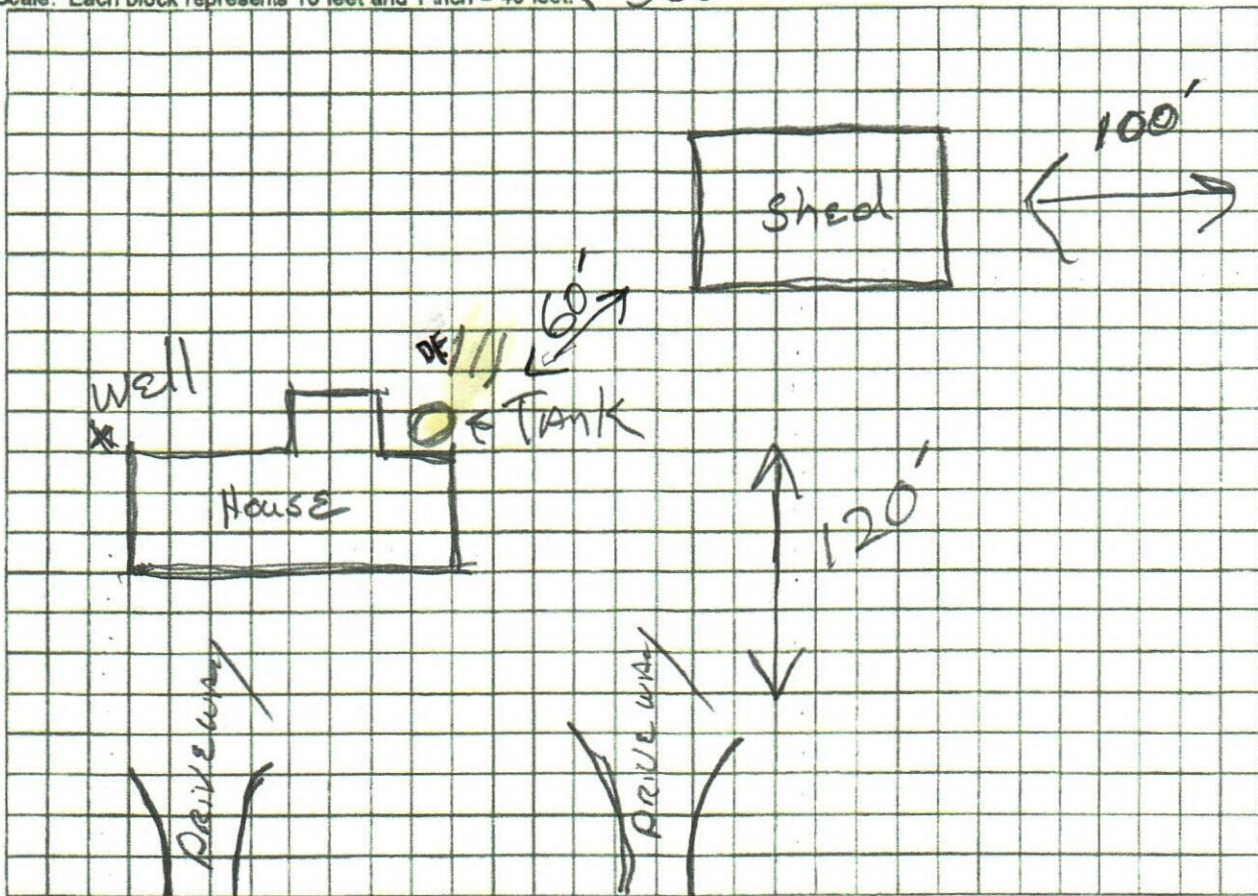
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Permit Application Number 03-0678

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.  $\leftarrow 360' \rightarrow$

↑  
N



Notes: \_\_\_\_\_

Site Plan submitted by: Curtis Stamps

Plan Approved [Signature]

Not Approved \_\_\_\_\_

Date 9/28/23

By [Signature]

[Signature]

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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

Incorporated: 62-6.004, F.A.C.