



PERMIT NO. 25-0702  
DATE PAID: 9/4/25  
FEE PAID: 25.00  
RECEIPT #: 5246260

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

<input type="checkbox"/> New System	<input type="checkbox"/> Existing System	<input type="checkbox"/> Holding Tank	<input type="checkbox"/> Innovative
<input type="checkbox"/> Repair	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Temporary	<input checked="" type="checkbox"/> MOD

WILLIAM BROWN (CLAYTON)

APPLICANT: WILLIAM BROWN (CLAYTON) Temporary [ x ] MOD  
ROBERT FORD III EMAIL: nflseptictank@comcast.net

AGENT: ROBERT FORD III- NORTH FLORIDA SEPTIC TANK INC  
344 25 ST  
TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE STATE ROAD 100, LAKE CITY FL 32025

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: 3 BLOCK: -- SUBDIVISION: PINE HILL UNREC PLATTED: 2020

PROPERTY ID #: 31-5S-16-03744-203 ZONING: VAC I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 10.64 ACRES WATER SUPPLY: [ ☒ ] PRIVATE PUBLIC [ ☐ ] ≤2000GPD [ ☐ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / ☒ N ]

PROPERTY ADDRESS: 1174 SW GRAPE ST, LAKE CITY FL

**DIRECTIONS TO PROPERTY:**

## BUILDING INFORMATION

[ x ] RESIDENTIAL                      [   ] COMMERCIAL

<u>Unit No.</u>	<u>Type of Establishment</u>	<u>No. of Bedrooms</u>	<u>Building Area Sqft</u>	<u>Commercial/Institutional System Design Table I, Chapter 62-6, FAC</u>
1	MH NEW	0	0	

1 MH- NEW

2 OLD

3

4

☐ Floor/Equipment Drains      ☐ Other (Specify)

SIGNATURE: *Robert Ford 9/9/97*

DATE: 9/2/25





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

PERMIT #: **12-SC-3186791**  
APPLICATION #: **AP2246966**  
DATE PAID: \_\_\_\_\_  
FEE PAID: \_\_\_\_\_  
RECEIPT #: \_\_\_\_\_  
DOCUMENT #: **PR2321515**

CONSTRUCTION PERMIT FOR: OSTDS Existing Modification  
APPLICANT: WILLIAM\*\*25-0702 BROWN  
PROPERTY ADDRESS: 1174 SW GRAPE Lake City, FL 32024  
LOT: 3 BLOCK: \_\_\_\_\_ SUBDIVISION: Pine Hills  
PROPERTY ID #: 03744-203 [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 Existing 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 [ 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: 4x4 post at water faucet east of site

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

E BOTTOM OF DRAINFIELD TO BE [ 54.00 ] [ INCHES ] FT [ ] ABOVE [ ] BELOW BENCHMARK/REFERENCE POINT

L  
D FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [ ] INCHES

O The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated flow of 400 gpd.

T Adding 350sqft to existing 150sqft for a total of 500sqft for the new 4 bedroom.

H  
E  
R

SPECIFICATIONS BY: Robert Ford TITLE: Master Contractor

APPROVED BY: [Signature] TITLE: Environmental Specialist I Columbia CHD

DATE ISSUED: 09/10/2025

EXPIRATION DATE: 03/10/2027

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

KR

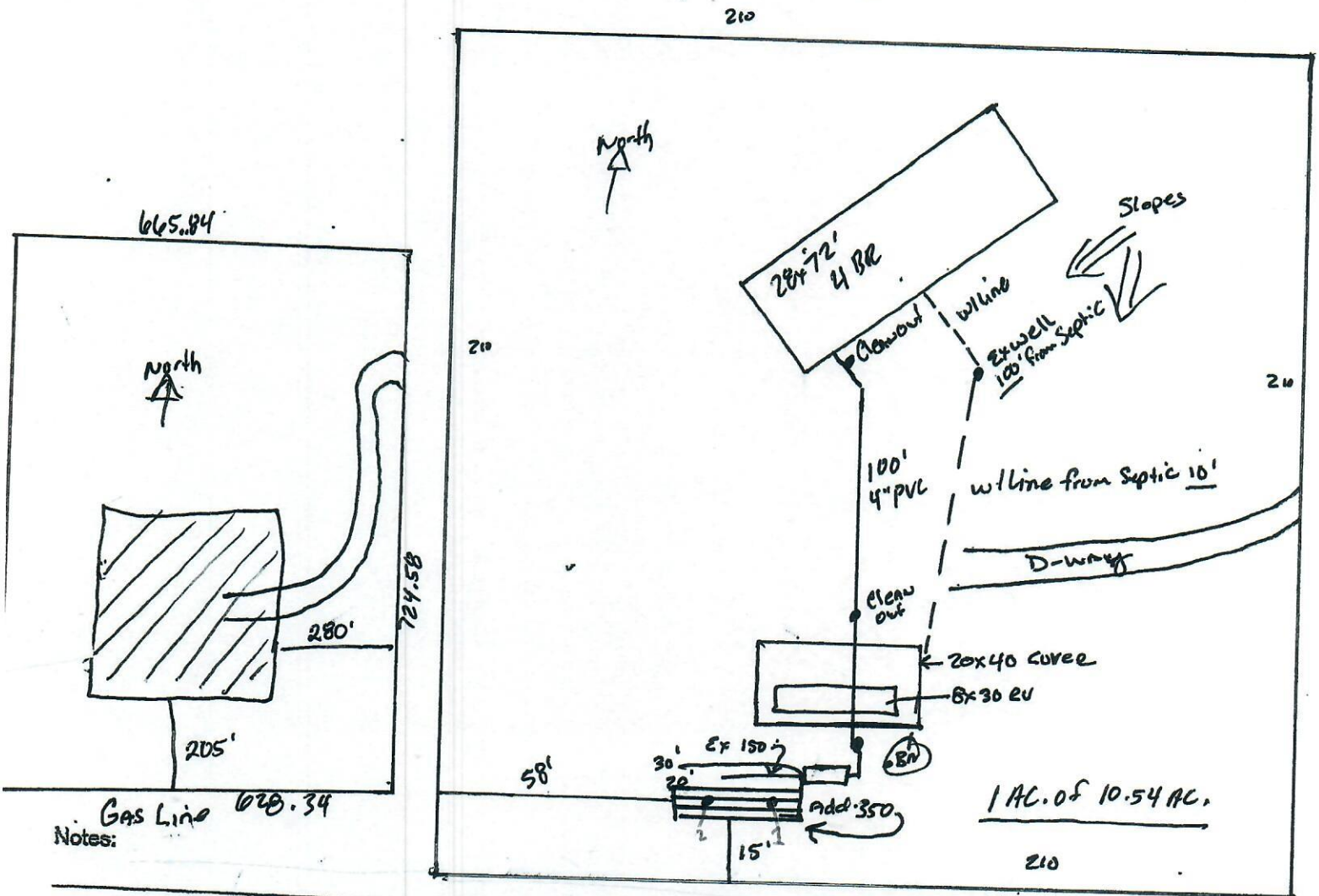


STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

1"=40'

Permit Application Number 25-0702  
Brown

PART II - SITEPLAN



Site Plan submitted by: Robert Ford 9/2/05  
Plan Approved ✓ Not Approved \_\_\_\_\_  
By [Signature] Date 9/8/25  
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.