

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

PERMIT #: 12-SC-2734746

APPLICATION #: AP1970197

DATE PAID: 6.2.23

FEE PAID: 105-00

RECEIPT #:\_\_\_\_

PR1962074

CONSTRUCTION PERMIT FOR: OSTDS New  APPLICANT: Susan**23-0391 Hall	<del>and an interpretation of the control of the contro</del>
PROPERTY ADDRESS: 574 NW Old Mill Dr Lake Cit	y, FL 32024
LOT: BLOCK: ST	
PROPERTY ID #: 02305-003	[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]  [OR TAX ID NUMBER]
381.0065, F.S., AND CHAPTER 64E-6, F.A. SATISFACTORY PERFORMANCE FOR ANY SPECIFICATION OF THE SERVED AS A BASIS FOR ISSUANCE	OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. PT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL,
SYSTEM DESIGN AND SPECIFICATIONS	
T [ 1,500 ] GALLONS / GPDNew Sep	tic Tank CAPACITY
A [ ] GALLONS / GPD N/	A CAPACITY
	CITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALLONS]
	[ ]GALLONS @[ ]DOSES PER 24 HRS #Pumps [ ]
D [ 875 ] SQUARE FEET New Drainfield  R [ ] SQUARE FEET N/A  A TYPE SYSTEM: [*] STANDARD [ ] FIL  I CONFIGURATION: [*] TRENCH [ ] BED  N  F LOCATION OF BENCHMARK: Nail in oak N of site	LED [] MOUND []
	.00 ] [ INCHES / FT ] [ ABOVE   BELOW   BENCHMARK/REFERENCE POINT
	The second secon
	.00 ] [ INCHES   FT ] [ ABOVE   BELOW   BENCHMARK/REFERENCE POINT
L D FILL REQUIRED: [ 0.00 ] INCHES EX	CAMAMION PROMITED . I OOO 1 TYGUING
	cupancy of 10 persons (2 per bedroom), for a total estimated flow of
н	
E	
R	
SPECIFICATIONS BY: Rocky Ford	TITLE: Master Centra ctur
	TLE: Environmental Specialist I Columbia CHD
DATE ISSUED: 06/06/2023	EXPIRATION DATE: 12/06/2024
DH 4016, 08/09 (Obsoletes all previous edition	ns which may not be used)
Incorporated: 64E-6.003, FAC	Page 1 of 3

## STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

23-0391

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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.

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Incorporated 62-6.004, FAC

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM (OSTDS) PERMIT NO. 23\_D39|
DATE PAID: 6223
FEE PAID: 1919012

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR:  [X] New System [] Existing System [] Holding Tank [] Innovative [MODIFICATION APPLICANT: SUSAN HALL  EMAIL: VOCKY FORD  WINDSTREAM, net TELEPHONE: 384-497-2311  MAILING ADDRESS: 546 SW DOVY ON ST, FT. White, Ft. 3203
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: NA BLOCK: NA SUBDIVISION: NA PLATTED:
PROPERTY ID #: 26-38-16-02305-0020NING: I/M OR EQUIVALENT: [ Y / 10]
PROPERTY SIZE: 1.59 ACRES WATER SUPPLY: [ Y PRIVATE PUBLIC [ ] <= 2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y /(N)] DISTANCE TO SEWER: FT
DIRECTIONS TO PROPERTY: TRONTO NW Main BIVO, take
evit onto NW Bascom Nornis DR, TR onto NW Lake Jeffrey Rd, Th onto old mill Rd.
BUILDING INFORMATION [ X] RESIDENTIAL [ ] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table I, Chapter 62-6, FAC
SF Residential 4 2780 - existing 3 walk
[ ] Floor/Equipment Drains [ ] Other (Specify)
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)