



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

PERMIT NO

DATE PAID:

FEE PAID:

RECEIPT #:

58784

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Steve and Stephanie Isbel

EMAIL: hessy1972@yahoo.com

AGENT: Jacob Zervakis / Luxury Pools and Hardscapes 3 LLC

TELEPHONE: 904-676-0076

MAILING ADDRESS: 430 MCLAWS CIRCLE Suite 201, Williamsburg, VA 23185

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 ☒ NLOT: H/A Aerial H BLOCK: _____ SUBDIVISION: Hillcrest PLATTED: _____PROPERTY ID #: 33-4S-17-08944-015 (32998) ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☒ NPROPERTY SIZE: 5.65 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 282 SW Breezy Drive, Lake City, FL 32025

DIRECTIONS TO PROPERTY: (PART OF PRCL "H" HILLCREST UNR FOLLOWS): COMM NE COR OF NW1/4 O624.84 FT,
S 9 DG W 474.91 FT FO

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

Pool

2

3

4

ORIGINAL ATTACHED

☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: Stephanie Isbel

DATE:

2/6/2023

DAFF7D506F3E432...

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

Incorporated 62-6.004, FAC

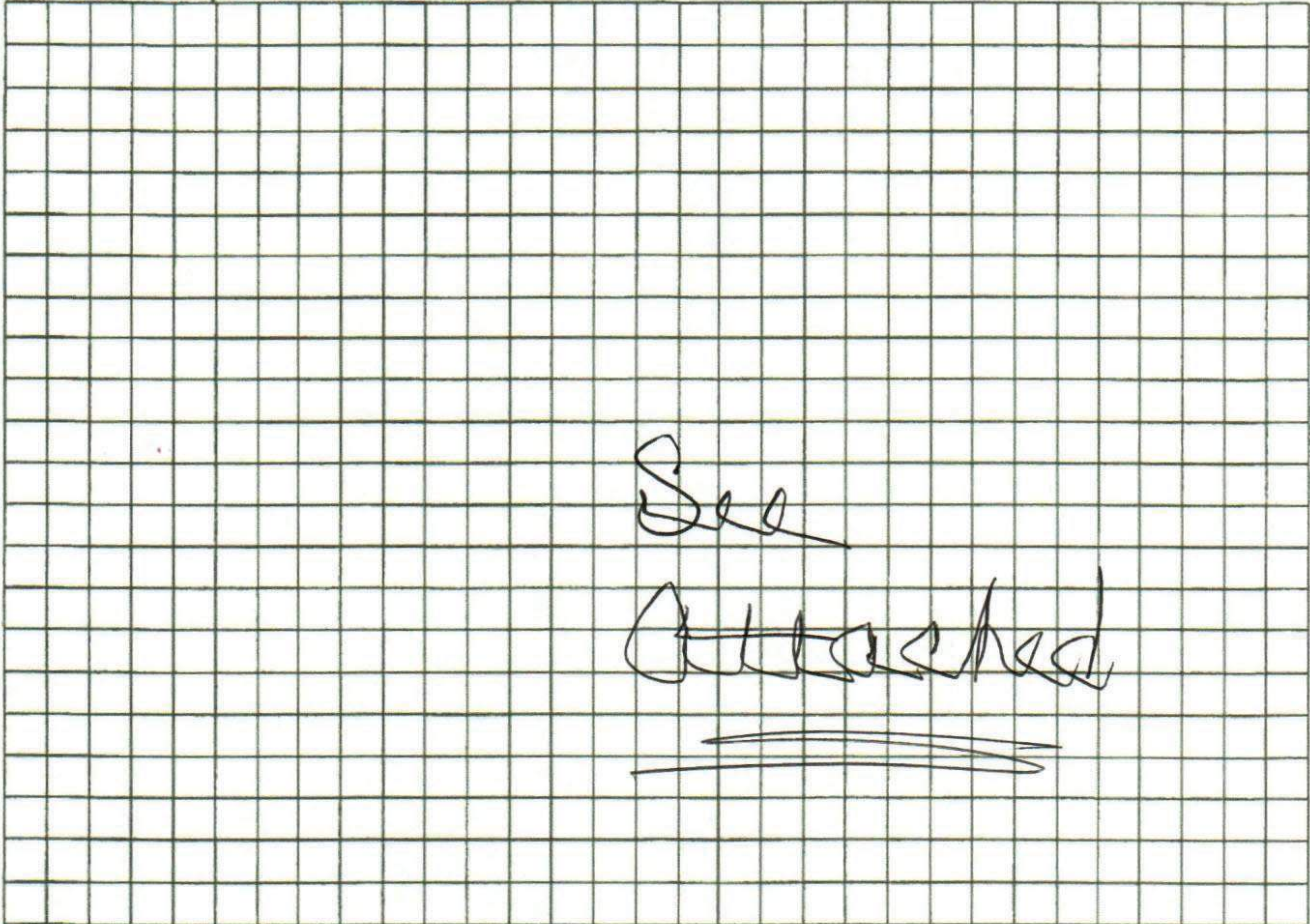
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APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23-0105

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

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: Lindsay Stebbins 2/7/2023
Plan Approved X Not Approved _____ Date 2/9/23
By [Signature] [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

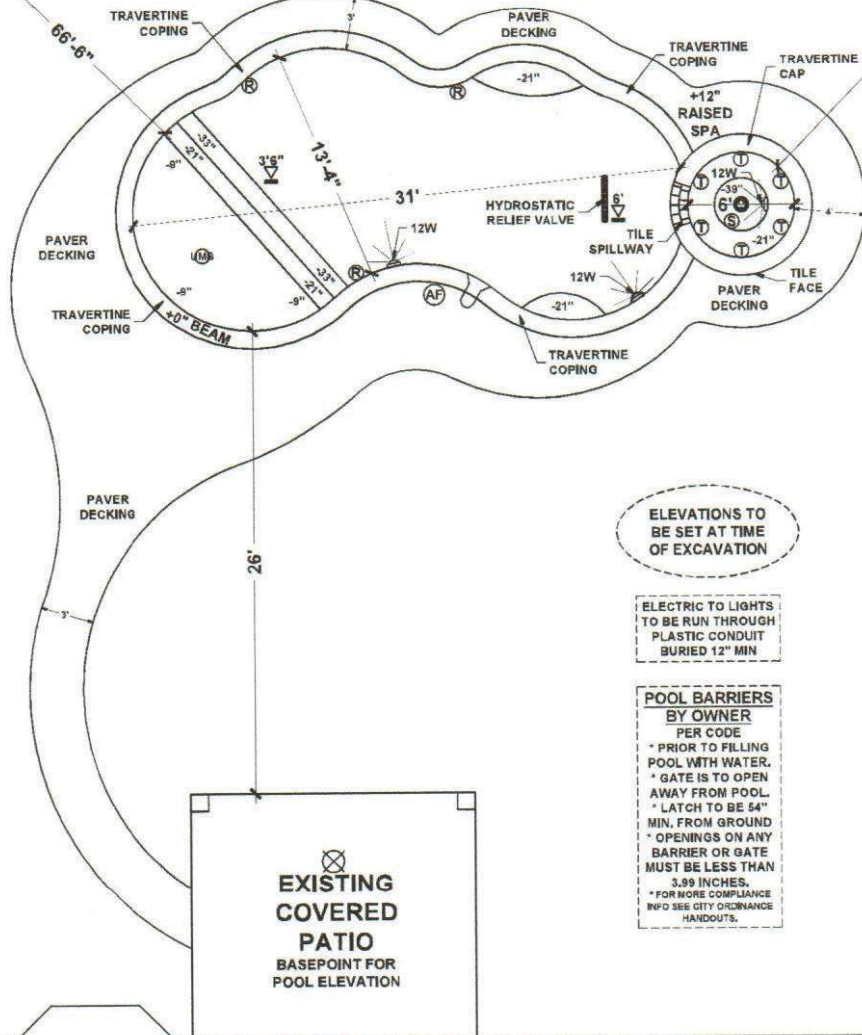
SHEET: 2 of 8
SCALE: 1/8"=1'-0"

SITE PLAN

**POOL BARRIERS
BY OWNER
PER CODE**

- ✱PRIOR TO FILLING
POOL WITH WATER.
- ✱GATE IS TO OPEN
AWAY FROM POOL.
- ✱LATCH TO BE 54"
MIN FROM GROUND.
- ✱OPENINGS ON ANY
BARRIER OR GATE
MUST BE LESS
THAN 3.89 INCHES.

EFOR MORE COMPLIANCE
INFO SEE CITY ORDINANCE
HANDOUTS.



ELEVATIONS TO
BE SET AT TIME
OF EXCAVATION

ELECTRIC TO LIGHTS
TO BE RUN THROUGH
PLASTIC CONDUIT
BURIED 12" MIN

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LEGEND

-  INFLOOR ACTUATOR
-  BASKETBALL SLEEVE
-  VOLLEYBALL SLEEVE
-  UMBRELLA SLEEVE
-  BUBBLER or DECK JET
-  SURFACE RETURN
-  FLOOR RETURN
-  ECOCLEAN RETURN
-  SPA JET (THERAPY)
-  VACUUM PORT
-  CLEANER PORT
-  AUXILIARY SUCTION
-  SIDE SUCTION

JACKSONVILLE-SOUTH
PHONE: (757) 220-5577



NAME: ISBEL, STEVEN & STEPHANIE
ADDRESS: 282 SW BREEZY DRIVE
CITY: LAKE CITY, FL 32025
PHONE 1: 386-795-2103
CONSULTANT: MRS LISA BODKIN
PHONE: 904-676-5171
SUPERVISOR: JOE GEEGRA
PHONE: 904-652-7744
CONTRACT DATE: 1-2-23
DRAFTSMAN: T.B.

ISSUE DATE:
1-20-23
JOB # 1034

CUSTOMER SIGNATURE: