

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL

ONSITE SEWAGE TREATMENT AND DISPOSAL FEE PAID: SYSTEM (OSTDS)

	CONTOMPTIONTONT	

APPLICATION FOR:	FOR CONSTR	UCTION PE	KMIT	(
	Existing Sys	tem [Holding	Tank [] Innovative
[X] New System [] [] Repair []	Abandonment	1	Tempora	ry []
APPLICANT: DANIELS MICHAEL	MCCALLISTER	SR			TANDA L. L. CAMBRELL MINES .
AGENT: GARY THOMPSON				TELEPHO	ONE :
MAILING ADDRESS: 3555 256TH					
	J.,		·	DRILIT	72 32071
TO BE COMPLETED BY APPLICAL BY A PERSON LICENSED PURSUI APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUI	ANT TO 489.105 TO PROVIDE DO	(3) (m) OF CUMENTATIO	439.552, F N OF THE D	LORIDA STA	TUTES. IT IS THE T WAS CREATED OR
PROPERTY INFORMATION					
LOT: 2 BLOCK: N/A	SUBDIVISION	FOXWOOD	FHASE 1		PLATTED:
PROPERTY ID #: 27-6S-16-0395	1-102	ZONIA	G RES	I/M OR EQ	UIVALENT: [NO]
PROPERTY SIZE: 5.030 ACRES	S WATER SUPPI	Y: [X] FR	IVATE PUB	LIC []<=	2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER	381.0065, FS?	[NO]		DISTANCE	TO SEWER: N/A FT
PROPERTY ADDRESS: SW J	EANLEA PLACE	FORT WHITE			
DIRECTIONS TO PROPERTY: TA	AKE STATE ROAL TE ON LEFT.	0 47 SOUTH.	T JRN LEFT (N HTUOS NC	EST JEANLEA PLACE.
	277.250 Sections				1
BUILDING INFORMATION [X] RESIDENTIAL	[] COM	MERCIAL		
Unit Type of	No. of	Building	Commercia	L/Instituti	onal System Design
No. Establishment	Bedrooms	Area Sqft	Table 1, 0	hapter 62-	6, FAC
1 HOUSE	4	2.905	HOUSE = 25	541	
2 +			BONAS = 3	64	12.71
3 pale barn	The second of the second of	200	TOTAL = 29	The state of the s	
4	To the single	000	101AL - 23	05	
1), 7			(A		12ED
[] Floor/Equipment Drai	ns [] Cther	(Specify)		101	0.23
SIGNATURE:				DAT	E: 10/2/2023
DEP 4015, 06-21-2022 (Obs	oletes previo	us edition	s which ma	ay not be	used)

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

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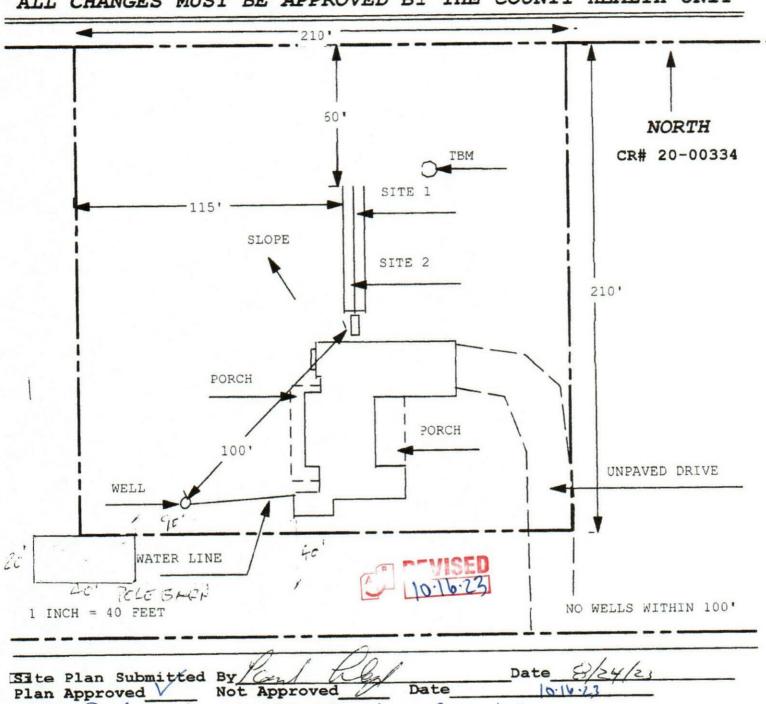
CR = 20-00334

PERMIT NO. 2

DATE PAID:

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number:

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



a Appr	oved_V	Not	Appro	ved	Date	10.14.53	
Sa	llii "	Ford	EH	birector	Columb	A	CPHU