

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

PERMIT #: 12-SC-2625868

APPLICATION #: AP1928565

DATE PAID: 1. 4. 23

FEE PAID: 310-00

RECEIPT #:__

DOCUMENT #: PR1884649

	DOCOMENT W:	111004043
BLA SE BORD MANNEY COUNTY SET TO A SERVICE AND A		
CONSTRUCTION PERMIT FOR: OSTDS New		
APPLICANT: APRIL**22-1029 DENSLOW		Property leaves
PROPERTY ADDRESS: 10306 OLD WIRE Fort White, FL 32038		
LOT: BLOCK: SUBDIVISION:	SHEET WATER WATER	to antible to the same of the
PROPERTY ID #: 03954-001	[SECTION, TOWNSHIP, RANGE, PARC [OR TAX ID NUMBER]	CEL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPART SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF TH	MENT APPROVAL OF SYSTEM DOE OF TIME. ANY CHANGE IN ERMIT, REQUIRE THE APPLICANT IN THIS PERMIT BEING MADE PLICANT FROM COMPLIANCE WITH	MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS		
T [1,050] GALLONS / GPD Septic Tank	G) D) G THU	
T [1,050] GALLONS / GPD Septic Tank A [] GALLONS / GPD N/A		
, 325 N/A	CAPACITY	
THAT IN CAPACITI		
K [] GALLONS DOSING TANK CAPACITY []GAL	LLONS @[]DOSES PER 24 HRS	#Pumps []
- /		
D [500] SQUARE FEET Drainfield SYSTEM		
R [] SQUARE FEET N/A SYSTEM		
A TYPE SYSTEM: [x] STANDARD [] FILLED []	MOUND []	
CONFIGURATION: [X] TRENCH [] BED []		
N		
F LOCATION OF BENCHMARK: Nail in tree with pink ribbon west of site		
I ELEVATION OF PROPOSED SYSTEM SITE [12.00] [INCHES	FT] [ABOVE BELOW] BENCHMARK/RI	EFERENCE POINT
	FT] [ABOVE BELOW] BENCHMARK/RE	
L		101111
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQ	UIRED: [0.00] INCHES	
The system is sized for 4 bedrooms with a maximum occupancy of 8 pe	rsons (2 per bedroom), for a total estimate	d flow of
400 gpd.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
T		1
н		
E		
R		
SPECIFICATIONS BY: Kelli Rogers	TITLE:	
Kelli Rogers	A A A A A A A A A A A A A A A A A A A	
APPROVED BY: Cassandra Bonds TITLE: Environme	ental Specialist I	Columbia CHD
DATE ISSUED:01/05/2023	EXPIRATION DATE:	07/05/2024
OH 4016, 08/09 (Obsoletes all previous editions which may	not be used)	
Incorporated: 64E-6.003, FAC		Page 1 of 3
v 1.1.4 AF1928565	SE1803105	

2



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

DATE PAID:
PEE PAID:
RECEIPT #: 1928565

APPLICATIO	N FOR CONSTR	UCTION PE	RMIT		
APPLICATION FOR: [] New System [] [] Repair []] Holding Tank] Temporary	[] Innovative	
APPLICANT: April Den	clow		EMAIL	ı;	
AGENT: Suwanne Septic			TELEPHONE: (239) 910-7555		
MAILING ADDRESS: 2215 (The state of the s				
TO BE COMPLETED BY APPLICATE BY A PERSON LICENSED PURSON APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUIREMENTS	ANT TO 489.105	CUMENTATION	89.552, FLORIDA S' OF THE DATE THE	TATUTES. IT IS THE LOT WAS CREATED OR	
PROPERTY INFORMATION			OSTDS REMED	DIATION PLAN? [Y /(N)]	
LOT:BLOCK:SUBDIVISION:				PLATTED:	
PROPERTY ID #: 27-65-16-6 PROPERTY SIZE: 14.73 ACRES IS SEWER AVAILABLE AS PER PROPERTY ADDRESS: 16 DIRECTIONS TO PROPERTY: 17 BUILDING INFORMATION	water supply 381.0065, FS? 0306 Old	[Y/N] Win Road	ATE PUBLIC []<=	2000GPD []>2000GPD CE TO SEWER: NA FT	
Unit Type of No Establishment	No. of Bedrooms		Commercial/Instit	tutional System Design 62-6, FAC	
1 MH	4	2273			
2	_	712			
3					
4					
[] Floor/Equipment Dra	ins [] Oth	her (Specif	y)		
SIGNATURE: Dale W	atson		DA	TE: 12/26/2022	
DEP 4015, 06-21-2022 (Obs	oletes previous	s editions	which may not be u	sed)	
Incorporated 62-6.004, FAG				Page 1 of 4	

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 2 3 - 1029

| Jacre of 14, 73 |
| Ck represents 10 feet and 1 inch = 40 feet. | Not actual PIL Scale: Each block represents 10 feet and 1 inch = 40 feet. BM 32× 76 MH to P/L 100 to well Kella Roga 12/21/2022 old Wire Rd Notes: Site Plan submitted by: Dale Watson

Plan Approved

By

Not Approved

1/5/23 12/26/2022 Date 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.