



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

Old Permit #
94-419

PERMIT NO. 24-0740
DATE PAID: 10/3/24
FEE PAID: 60.00
RECEIPT #: 12-BID-7597044

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Claudio Veras

EMAIL: loraslovelyplants@gmail.com

AGENT:

TELEPHONE: 3865900393

MAILING ADDRESS: 11206 S W Hwy 441 Lake City 71 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: 23 BLOCK: SUBDIVISION: Joy Acres

PLATTED: Book 4 pg 15- Col. Cont. 115-A

Parcel ID: 29-5-17-09451-024

PROPERTY ID #: ZONING: Residential OR EQUIVALENT: ☐ Y ☐ N Fi

PROPERTY SIZE: 1 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N

DISTANCE TO SEWER: N-A FT

PROPERTY ADDRESS: 400 SW Sherri Circle Lake City 71 32024

DIRECTIONS TO PROPERTY: Hwy 441 S from Lake City to 349 (Approx 10 miles)
Turn (R) on 349 - drive about 3 miles to Sherri Cir
Turn (R) onto Sherri Cir - turn (R) again go around curb
then another curb into the drive

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	House Trailer	2	864	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: Claudio Veras

DATE: 10-2-2024

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

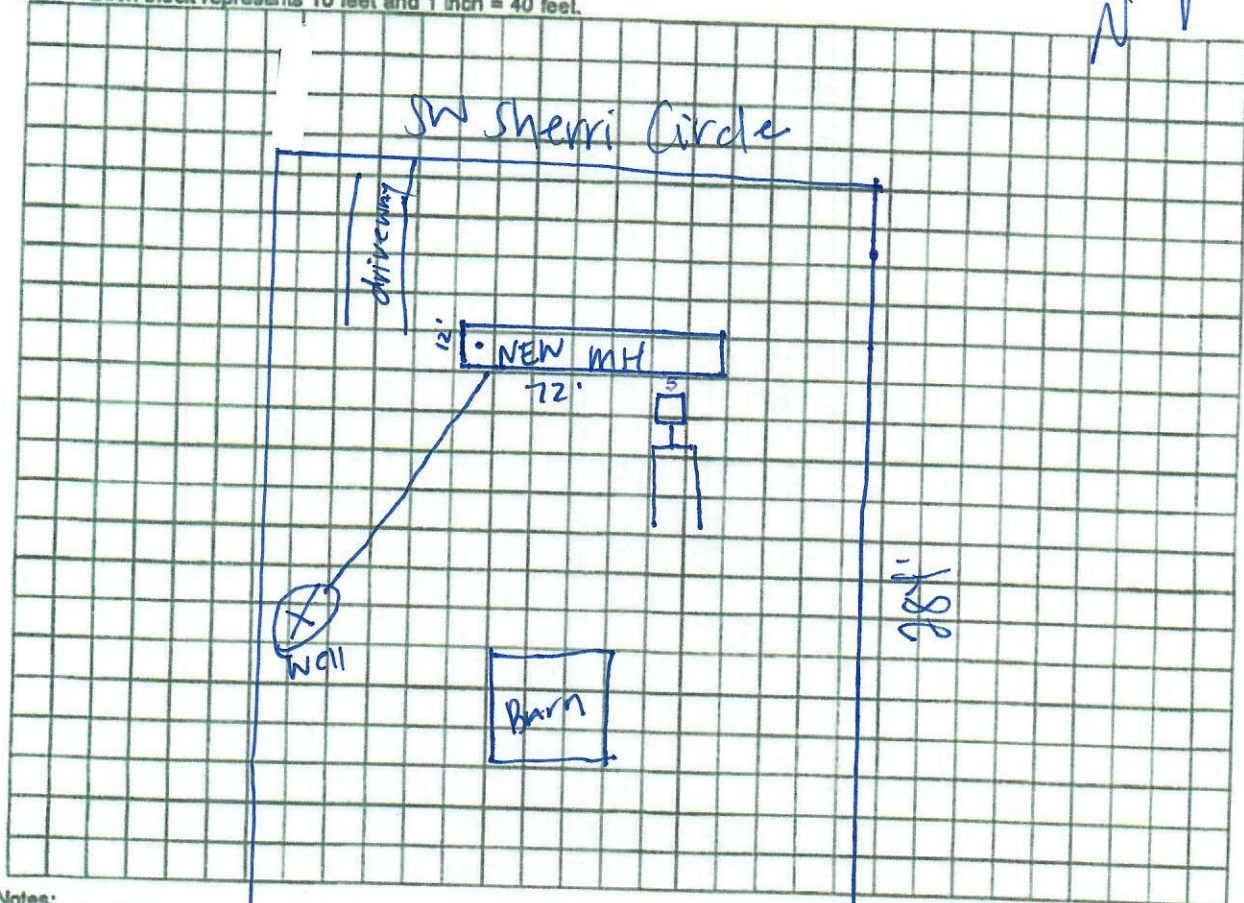
Incorporated 62-6.004, FAC

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

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



Notes: _____

Site Plan submitted by _____

Plan Approved _____

By _____

153'
Claudio Venas

Not Approved _____

Date 10/4/24

County Health Department

ES2 Columbia

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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Incorporated: 62-6.004, F.A.C.