office



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM PERMIT #: 12-SC-2055965

APPLICATION #: AP1479191

PEE PAID: 31000

RECEIPT #:_

DOCUMENT #: PR1325175

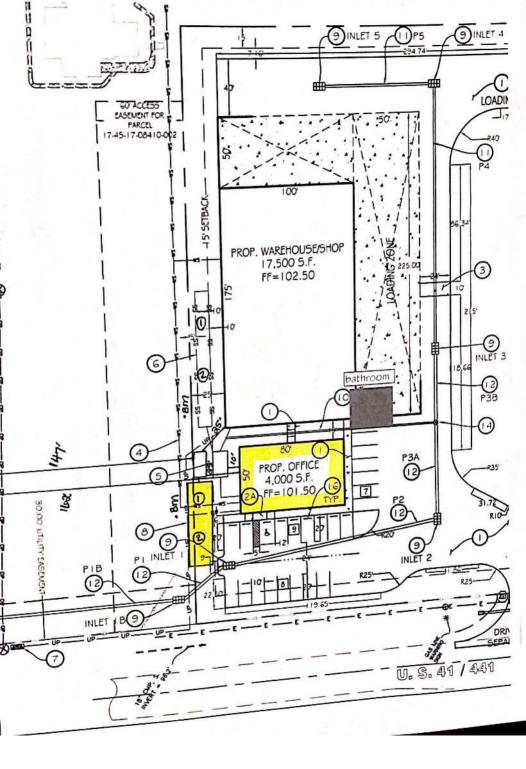
APPLICANT: **20-0296 (Forty Seven Properties)		
20-0290 (Forty Seven Properties)		
PROPERTY ADDRESS: US Hwy 441 Lake City, FL 32024		
LOT: BLOCK: SUBDIVISION:	- 77.5 % 1-	
	[SECTION, TOWNSHIP, RANGE, PARC [OR TAX ID NUMBER]	EL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTS SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF THIS PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICATION. SUCH MODIFICATIONS MAY RESULT ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICATION, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PERMIT DOES NOT EXEMPT THE APPLICATION.	ENT APPROVAL OF SYSTEM DOE. OF TIME. ANY CHANGE IN RMIT, REQUIRE THE APPLICANT IN THIS PERMIT BEING MADE LICANT FROM COMPLIANCE WITH	S NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS		
T [1,350] GALLONS / GPDSeptic Tank	CARACTEV	
A [] GALLONS / GPD Seonic lank	CAPACITY	
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMAN		ONET
K [] GALLONS DOSING TANK CAPACITY []GAL	LONS @[]DOSES PER 24 HRS	#Pumps []
The state of the s		
D [750] SQUARE FEET Drainfield SYSTEM		
R [] SQUARE FEETSYSTEM		
A TYPE SYSTEM: [X] STANDARD [] FILLED [] M	DUND []	5 A A
I CONFIGURATION: [X] TRENCH [] BED []	The state of the s	
N		
F LOCATION OF BENCHMARK: Nail in stake at D/F site.		
I ELEVATION OF PROPOSED SYSTEM SITE [12.00] [INCHES	FT] [ABOVE BELOW BENCHMARK/RE	FERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [42.00] [INCHES	FT] [ABOVE BELOW BENCHMARK/RE	FERENCE POINT
L		
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQU	IRED: [0.00] INCHES	
System sized setting (Office),	the state of the s	
15 GPD per 100sqft of building H/C space.		
T *** 4,000sqft Office = 600 GPD ***		
н		
E		
R		
SPECIFICATIONS BY: William D Bishop IV	ITLE: Master Septic Contractor	
	ntal Specialist II	
DATE ISSUED: 04/24/2020	EXPIRATION DATE:	10/24/2021
OH/4015, 08/09 (Obsolutes all previous editions which may :	not be used)	
Incorporated: 64E-6.003, FAC		Page 1 of 3



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO.	20.0296
DATE PAID:	4.11.50
FEE PAID:	310.00
RECEIPT #:	- 1800 (1800 (1900) - F
APIX	79191

[] Repair []	Existing System [] Holding Tank [] Innovative Abandonment [] Temporary []
APPLICANT: Forty Seven Proper	rties
AGENT: ROCKY FORD, A & B CO	ONSTRUCTION TELEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW Dos	rtch Street, FT. WHITE, FL, 32038
BY A PERSON LICENSED PURSU APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUI	NT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED ANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR ESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY INFORMATION	
LOT: NA BLOCK: NA	SUB: NA PLATTED:
	S WATER SUPPLY: [*] PRIVATE PUBLIC [X] <= 2000GPD []>2000GPD
	381.0065, FS? [Y /N] DISTANCE TO SEWER: NA FT
PROPERTY ADDRESS: US	
DIRECTIONS TO PROPERTY: 4	41 South to lot Right In Front of 3795
BUILDING INFORMATION	[] RESIDENTIAL [Y) COMMERCIAL
BUILDING INFORMATION Unit Type of Establishment	
BUILDING INFORMATION	[] RESIDENTIAL [] COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
BUILDING INFORMATION Unit Type of Establishment	[] RESIDENTIAL [** COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC O 4000 15 gpp per 100 SQ. ft.
BUILDING INFORMATION Unit Type of Establishment 1 Office	[] RESIDENTIAL [] COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
BUILDING INFORMATION Unit Type of Establishment Office 2	[] RESIDENTIAL [W COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC O 4000 15 gpp per 100 SQ. ft. Of Office Space
BUILDING INFORMATION Unit Type of Establishment Office 2	[] RESIDENTIAL [[COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC O 4000 15 gpp per 100 SQ. ft. Of Office Space



Scanned with CamScanner

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

FORTH SOMEN DOODER !	Permit Application Number 20.6296
- 3- SERVE PROPERTIES. PART	II - SITEPLAN
Scale: 1 inch = 40 feet.	

Notes:	
Site Plan submitted by: William 1. Bishop IF Plan Approved Not Approved	MASTER CONTRACTOR Date 4112020
COlumbia CI ALL CHANGES MUST BE APPROVED BY THE COUNTY HEAL	HD County Health Department

DH 4015, 08/09 (Obsoletes previous (Stock Number: 5744-002-4015-6)



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO.	20.0296
DATE PAID:	4.11.50
FEE PAID:	310.00
RECEIPT #:	- 1800 (1800 (1900) - F
APIX	79191

[] Repair []	Existing System [] Holding Tank [] Innovative Abandonment [] Temporary []
APPLICANT: Forty Seven Proper	rties
AGENT: ROCKY FORD, A & B CO	ONSTRUCTION TELEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW Dos	rtch Street, FT. WHITE, FL, 32038
BY A PERSON LICENSED PURSU APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUI	NT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED ANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR ESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY INFORMATION	
LOT: NA BLOCK: NA	SUB: NA PLATTED:
	S WATER SUPPLY: [*] PRIVATE PUBLIC [X] <= 2000GPD []>2000GPD
	381.0065, FS? [Y /N] DISTANCE TO SEWER: NA FT
PROPERTY ADDRESS: US	
DIRECTIONS TO PROPERTY: 4	41 South to lot Right In Front of 3795
BUILDING INFORMATION	[] RESIDENTIAL [Y) COMMERCIAL
BUILDING INFORMATION Unit Type of Establishment	
BUILDING INFORMATION	[] RESIDENTIAL [] COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
BUILDING INFORMATION Unit Type of Establishment	[] RESIDENTIAL [** COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC O 4000 15 gpp per 100 SQ. ft.
BUILDING INFORMATION Unit Type of Establishment 1 Office	[] RESIDENTIAL [] COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
BUILDING INFORMATION Unit Type of Establishment Office 2	[] RESIDENTIAL [W COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC O 4000 15 gpp per 100 SQ. ft. Of Office Space
BUILDING INFORMATION Unit Type of Establishment Office 2	[] RESIDENTIAL [[COMMERCIAL No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC O 4000 15 gpp per 100 SQ. ft. Of Office Space