



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

PERMIT NO. 24-0121
DATE PAID: 2/18/24
FEE PAID: 40.00
RECEIPT #: 2038838

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Achsan Dees / Constantinos Paragopoulos EMAIL: provisionpermitting@gmail.com

AGENT: Sorup North 863-577-5701 TELEPHONE: 386-365-3956

MAILING ADDRESS: 202 NE Owlrun Way Lake City, FL 32055

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

LOT: 35 BLOCK: _____ SUBDIVISION: Frank Thomas PLATTED: _____

PROPERTY ID #: 0-25-17-04659-035 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: .85 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 202 NE Owlrun Way Lake City, FL 32055

DIRECTIONS TO PROPERTY: R on US-441 N, R on NE Brew Rd,

R on NE Owl Runway, property on R

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC
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1	<u>mobile home</u>	<u>2</u>	<u>1120</u>	<u>built 1971</u>
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2				
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3				
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4				
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[] Floor/Equipment Drains [] Other (specify) _____

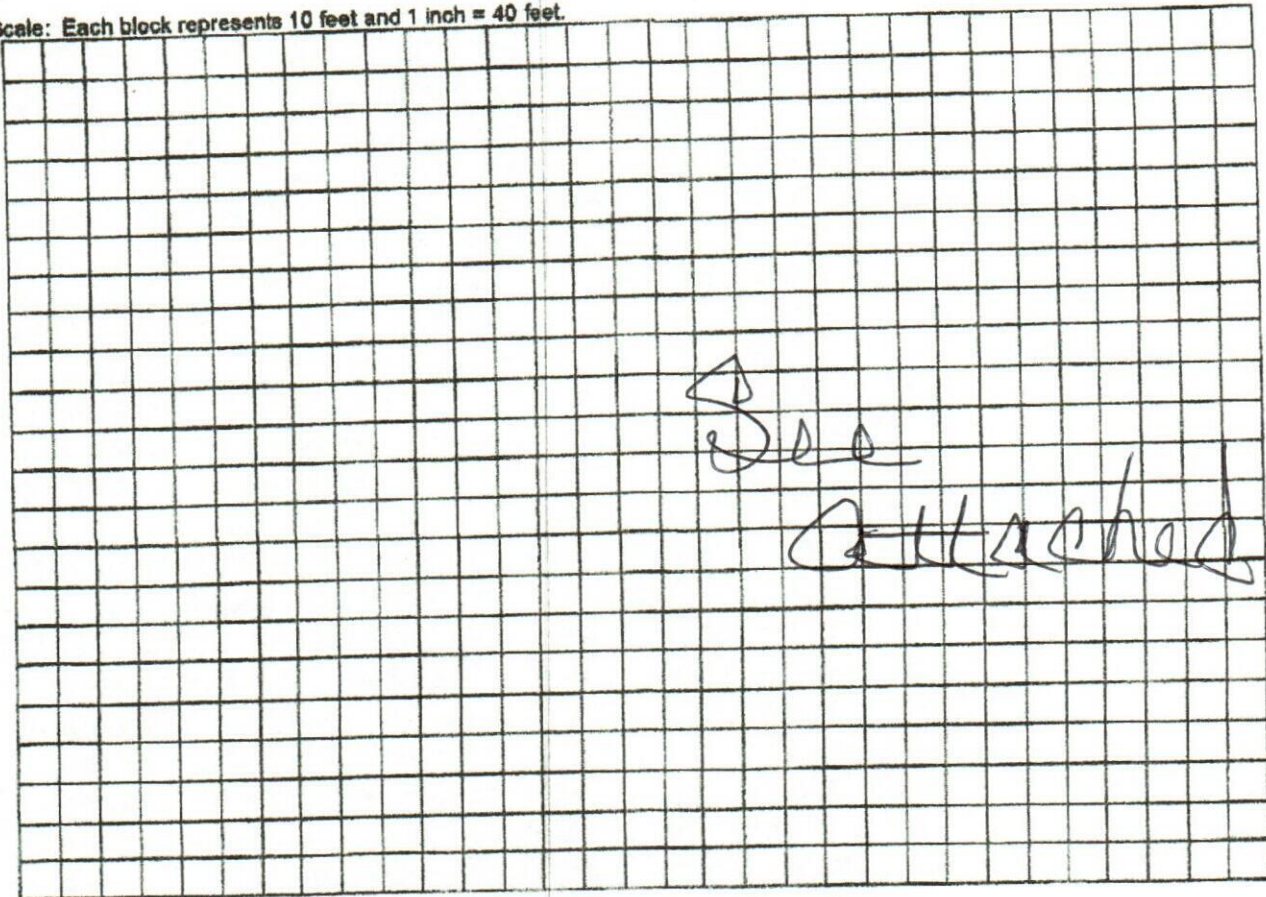
SIGNATURE: Sorup North DATE: _____

STATE OF FLORIDA
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APPLICATION FOR CONSTRUCTION PERMIT

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

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



Notes: _____

Site Plan submitted by: Song North

Plan Approved ☒ Sally Ford EHP Director Columbia

Not Approved ☐

Date 2-15-24

By _____

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.

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

Vision : To be the **Healthiest State** in the Nation

February 15, 2024

SONYA NORTH (PROVISION PERMITTING)
3311 SW SR 247
Lake City, FL 32024

RE: Contingency Letter
Application Document No: AP2038833
Centrax Permit Number: 12-SC-2849180
OSTDS Number:
ASHSAH DEES 24-0121
202 NE OWLRUN
Lake City, FL 32055
Lot:35 Block: Subdivision: Frank Thomas Sub Unrec

Dear Applicant:

This will acknowledge receipt of an application dated 02/08/2024 for a permit to use an existing onsite sewage treatment and disposal system located on the above referenced property.

From a review of your completed application, it has been determined that your existing system appears to meet the minimum standards of F.A.C. 62-6 for the proposed use. It is approved for use with the plans submitted to this office. If this system should fail, causing an unsanitary condition to exist, steps must be taken to bring the system into compliance immediately. Department approval of the system does not guarantee satisfactory performance for any specific period of time. Any change in material facts which served as a basis for issuance of this approval requires the applicant to modify the permit application. Such modification may result in this approval being made null and void. Issuance of this approval does not exempt the applicant from compliance with other Federal, State, or Local Permitting required for development of this property.

If you have any questions on this matter, please call our office at (386) 758-1058.

Sincerely,

Sallie Ford, Environmental Health Director

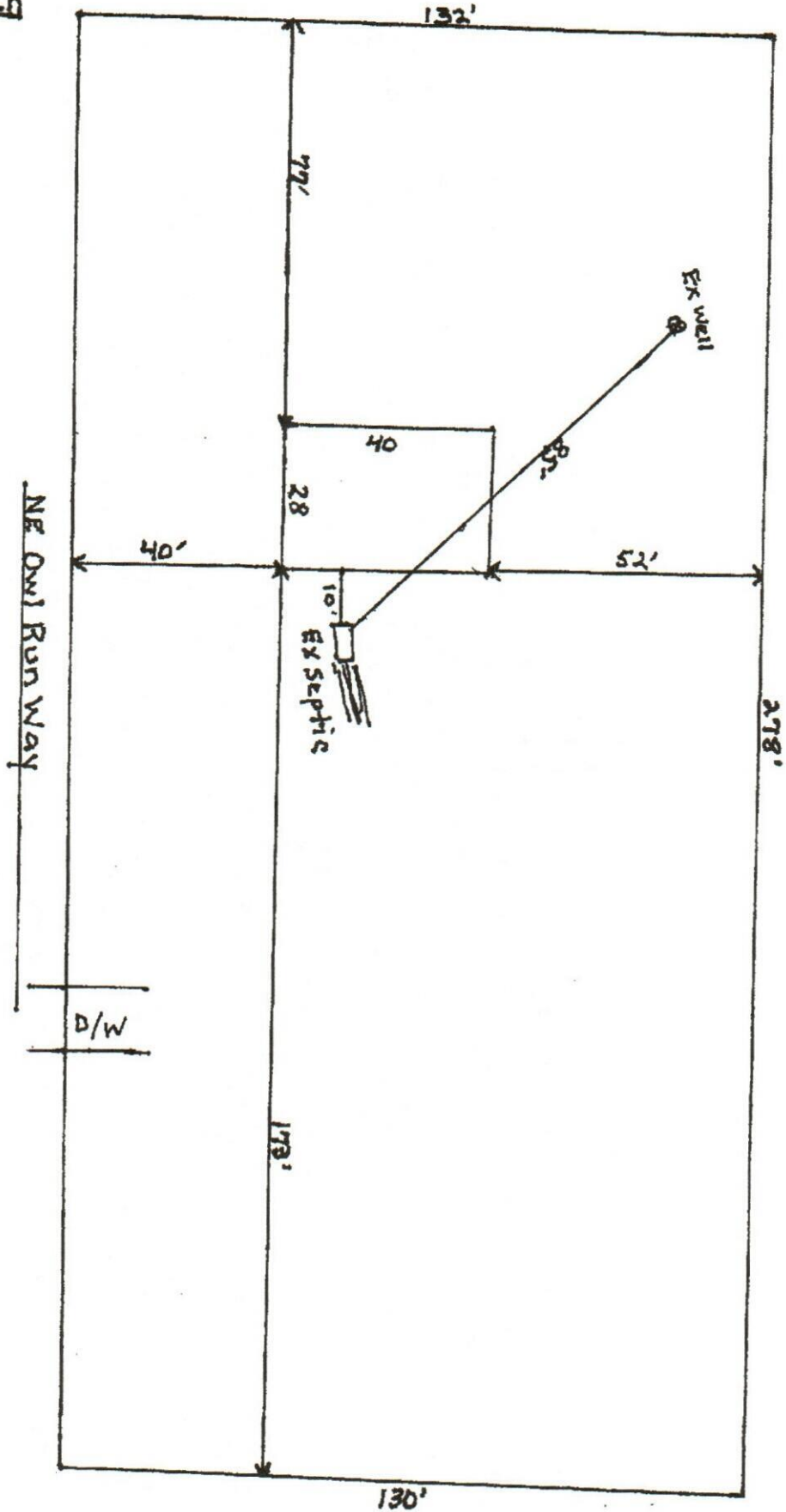
Enclosures

cc:

24-0121

NE Spivey Ln

Dees/Panagopoulos



1" = 30'