

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

PERMIT #: 12-SC-2756627

APPLICATION #: AP1978061

DATE PAID: 7.17.23

FEE PAID: 3/0.00

RECEIPT #:___

DOCUMENT #: PR1979087

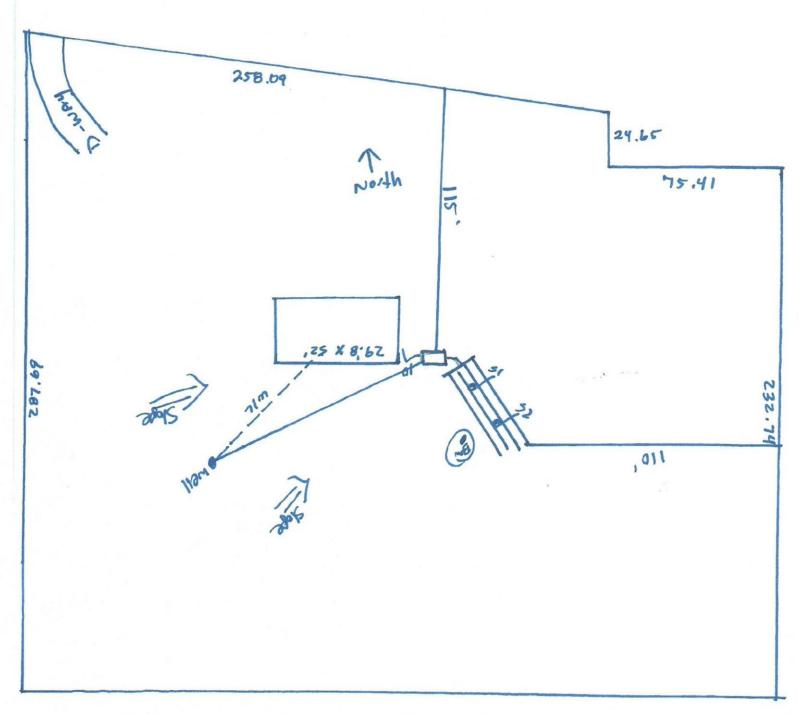
APPLICANT: JUSTIN	**23-0514 TYRE	Supplied Angle Anterthe souther to the state of	
	414 SW SEVILLE PI Lake	City, FL 32024	
LOT: 28	BLOCK:	SUBDIVISION: The Hunt Place	organismus
PROPERTY ID #: 03	491-000	[SECTION, TOWNSHIP, RANGE, PARC [OR TAX ID NUMBER]	CEL NUMBER]
WHICH SERVED AS PERMIT APPLICATION ISSUANCE OF THIS	AND CHAPTER 64E-6, F. DRMANCE FOR ANY SPEC A BASIS FOR ISSUANCE B. SUCH MODIFICATIONS PERMIT DOES NOT EX	IFIC PERIOD OF TIME. ANY CHANGE IN E OF THIS PERMIT, REQUIRE THE APPLICANT	S NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND S	PECIFICATIONS		
T [1.050] GALL	ONS / GPD Ser	otic Tank CAPACITY	
	ONS / GPD	N/A CAPACITY	
•		PACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALI	ONGI
	NS DOSING TANK CAPACITY		#Pumps []
		t lorenge of looses fer 24 hrs	#Fumps []
D [500] SOUARI	E FEET Drainfield	SYSTEM	
R [] SQUAR			
	[X] STANDARD [] F		
	[X] TRENCH [] BE		
N	[X] IRENCH [] BE	D []	
F LOCATION OF BENCH	MARK: Oak tree West of site		
I ELEVATION OF PROP	OSED SYSTEM SITE [24.00] [INCHES FT] [ABOVE BELOW BENCHMARK R	EFERENCE POINT
E BOTTOM OF DRAINFI	ELD TO BE [42.00] [INCHES FT] [ABOVE BELOW BENCHMARK / RI	EFERENCE POINT
L			
D FILL REQUIRED:	[0.00] INCHES	EXCAVATION REQUIRED: [0.00] INCHES	
		occupancy of 8 persons (2 per bedroom), for a total estimate	d flow of
O 400 gpd.		(= po. 200/) (or a total community	1
T			
			1
Н			
E			
R			
SPECIFICATIONS BY:	Robert W Ford	TITLE: Master Contractor	
APPROVED BY:	randia Brodo	FITLE: Environmental Specialist I	Columbia CHD
DATE ISSUED:	Cassandra Bonds 07/18/2023	EXPIRATION DATE:	01/18/2025
DH 4016, 08/09 (Obe	oletes all previous edit	ions which may not be used)	
Incorporated: 64E-			Page 1 of 3



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

PERMIT NO.	3-0514
DATE PAID:	111133
RECEIPT #: 19	78061

APPLICATION FOR CO	NSTRUCTION PERMIT
[] Repair [] Abandonma	(Ironwood)
AGENT: ROBERT FORD III, NORTH FLORIDA MAILING ADDRESS: 141 SE STATE	Rd 100, Lake City, Fl 32025
BY A PERSON LICENSED PURSUANT TO 48 APPLICANT'S RESPONSIBILITY TO PROVI	LICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED 9.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE DE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR NSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY ID #: (8-55-16-0349	ZONING: I/M OR EQUIVALENT: [Y N] SUPPLY: [X] PRIVATE PUBLIC []<=2000GPD []>2000GPD FS? [Y X] DISTANCE TO SEWER:FT
Unit Type of No. of Bedro	Other (Specify)
SIGNATURE: ROVERT JOYC	1 (1W DATE: 7-14-2023



331.23

305 SIY [

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

1 "= 40 '	Permit Application Number 3-0514
PART II - SITE	PLAN-TUre

See AH

Notes:	
Site Plan submitted by:	
Plan Approved	Date 7/18/23
Campia est of the columnia	County Health Departmen

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.