

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

E-MAILED

PERMIT #: 12-SC-3031564

APPLICATION #: AP2163889

DATE PAID: 10/31/24

FEE PAID: 316.00

RECEIPT #:___

DOCUMENT #: PR2183506

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: TRACY**24-0800 BISHOP	
PROPERTY ADDRESS: W JIM WARD Fort White, FL 32038	Despe
LOT: SUBDIVISION:	v 6 9)L[digh_*
PROPERTY ID #: 09715-001 [SECTION, TOWNSHIP, RANGE, PARCE]	CEL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDAY 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.	ES NOT GUARANTER MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS I [900] GALLONS / GPD New Multi-Chambered Septic CAPACITY A [] GALLONS / GPD N/A CAPACITY N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS CAPACITY CAPACITY SINGLE TANK:1250 GALLONS CAPACITY CAPACITY SINGLE TANK:1250 GALLONS CAPACITY SINGLE	LONSI
G [] GALLONS DOSING TANK CAPACITY []GALLONS @[]DOSES PER 24 HRS D [375] SQUARE FEET Drainfield SYSTEM A TYPE SYSTEM: [] STANDARD [] FILLED [x] MOUND [] C CONFIGURATION: [x] TRENCH [] BED [] F LOCATION OF BENCHMARK: Nail with pink ribbon in pine W of system	
ELEVATION OF PROPOSED SYSTEM SITE [21.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/RI EBOTTOM OF DRAINFIELD TO BE [15.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/RI	
FILL REQUIRED: [24.00] INCHES EXCAVATION REQUIRED: [] INCHES	
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated 300 gpd. Dosing tank to be used if gravity flow cannot be achieved.	d flow of
PECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP	
PPROVED BY: TITLE: Environmental Specialist I	Columbia сно
Sean P Havens ATE ISSUED: 11/05/2024 EXPIRATION DATE:	05/05/2026
EP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)	Page 1 of 3

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

PERMIT NO. DATE PAID: FEE PAID: RECEIPT #:

APPLICATION FOR CONSTRUCTION PERMIT

AGENT: Kameron Ke	en] Holding Tank [] Innovative] Temporary [] EMAIL:
	IL lodg St. St. Ok	10wn, FL 32680
PLATTED (MM/DD/YY) IF RE	CCANT OR APPLICANT'S AUTHOR RSUANT TO 489.105(3)(m) OR TY TO PROVIDE DOCUMENTATION OUESTING CONSIDERATION OF	TZED AGENT. SYSTEMS MUST BE CONSTRU 489.552, FLORIDA STATUTES. IT IS THE IN OF THE DATE THE LOT WAS CREATED OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY INFORMATION LOT: BLOCK:		OSTDS REMEDIATION PLAN? [Y
		PLATTED:
PROPERTY SIZE: 1.52 ACRES S SEWER AVAILABLE AS PER PROPERTY ADDRESS: 730	Sh/ Tim [[Y / 20]	DISTANCE TO SEWER:
ROPERTY ADDRESS: 7/30 C		(ites & O Colorish as
ROPERTY ADDRESS: 730 : IRECTIONS TO PROPERTY: 1	Take us-415 B tommy Jim Ward St, Para	Lites st O Carl Wilson Rd,
ROPERTY ADDRESS: 7/30 IRECTIONS TO PROPERTY: / (ILDING INFORMATION Lit Type of Establishment	Take us-4/5 B tommy Sim Ward St, Para [X] RESIDENTIAL No. of Building of	Lites st O Carl Wilson Rd,
ROPERTY ADDRESS: 730 . IRECTIONS TO PROPERTY: . B SW Control of the control of	Take us-4/5 B tommy Sim Ward St, Para [X] RESIDENTIAL No. of Building of	Lites st @ Corl wilson Rd, cl on @
ROPERTY ADDRESS: 730 STRECTIONS TO PROPERTY: 10 SW 10	Take W-4/5 B tommy Sim Ward St, Para [X] RESIDENTIAL No. of Building C Bedrooms Area Saft T	Lites st @ Corl wilson Rd, cl on @
ROPERTY ADDRESS: 7/30 IRECTIONS TO PROPERTY: / B SW (ILLDING INFORMATION Dit Type of Establishment	Take W-4/5 B tommy Sim Ward St., Para [K] RESIDENTIAL No. of Building C Bedrooms Area Saft T	Lites st @ Corl wilson Rd, cl on @

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 24-88

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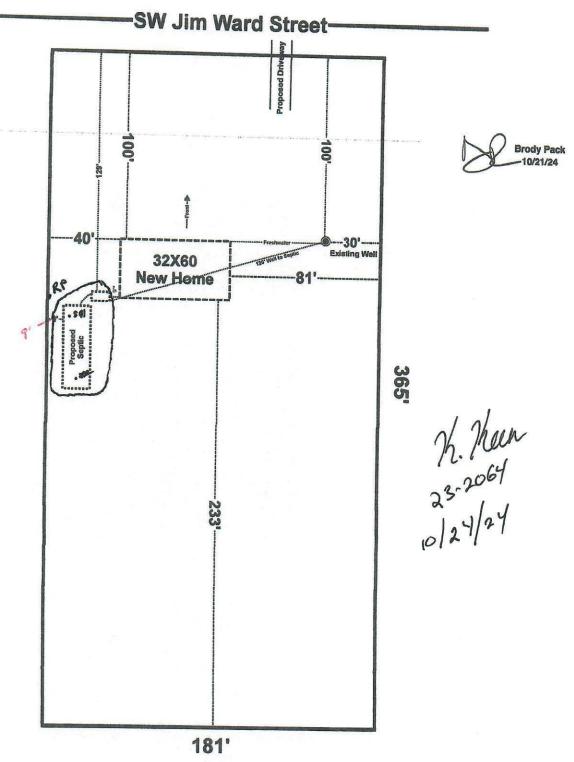
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) incorporated: 62-6.004,F.A.C.

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24-8800



Tracy Bishop / Michael McKleroy / Kelly McKleroy Parcel: 21-6S-17-09715-002 TBD SW Jim Ward St Ft. White, FL

Scale 1" = 40'