



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

PERMIT #: **12-SC-2712545**
APPLICATION #: **AP1968807**
DATE PAID: **5.30.23**
FEE PAID: **310.00**
RECEIPT #:
DOCUMENT #: **PR1961580**

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: Brady**23-0397 Hamric
PROPERTY ADDRESS: 442 SW Phoenix Gln Fort White, FL 32038
LOT: _____ BLOCK: _____ SUBDIVISION: _____
PROPERTY ID #: 04171-002 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF 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 PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [1,050] GALLONS / GPD _____ Septic Tank CAPACITY
A [] GALLONS / GPD _____ N/A CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DOSES PER 24 HRS #Pumps []

D [500] SQUARE FEET _____ Drainfield SYSTEM
R [] SQUARE FEET _____ N/A SYSTEM
A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [X] TRENCH [] BED []

F LOCATION OF BENCHMARK: Nail with pink ribbon in oak East of site

I ELEVATION OF PROPOSED SYSTEM SITE [18.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [48.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated flow of 400 gpd.
T
H
E
R

SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP

APPROVED BY: Cassandra Bonds TITLE: Environmental Specialist I Columbia CHD

DATE ISSUED: 06/02/2023 EXPIRATION DATE: 12/02/2024

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

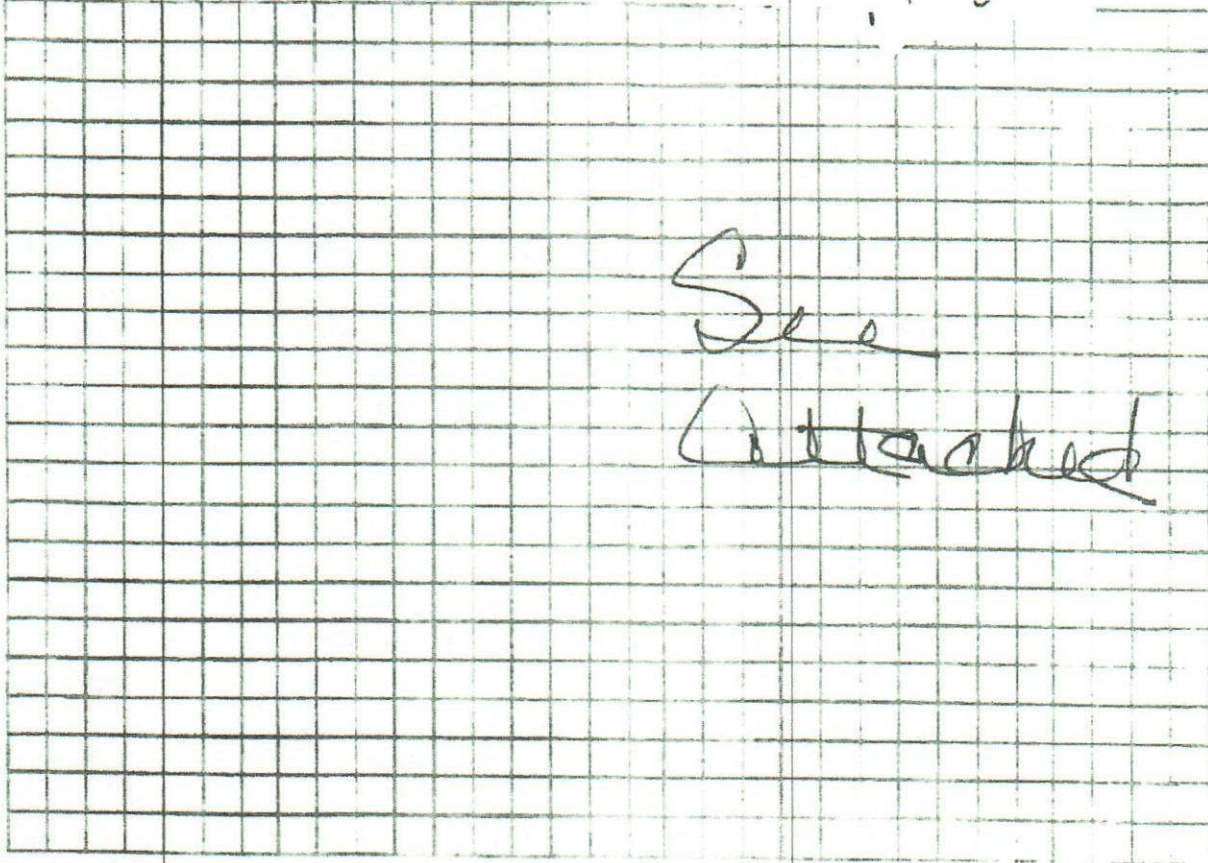
JP

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23-0397

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

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



Notes: _____

Site Plan submitted by: H. Veon 21-2064

Plan Approved ☒

Not Approved ☐

Date 5-10-23

By Camille Bonds

ESI Columbia 6/2/23

County Health Department

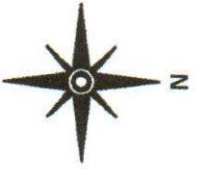
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 05-21-2022 (Obsoletes previous editions which may not be used)

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

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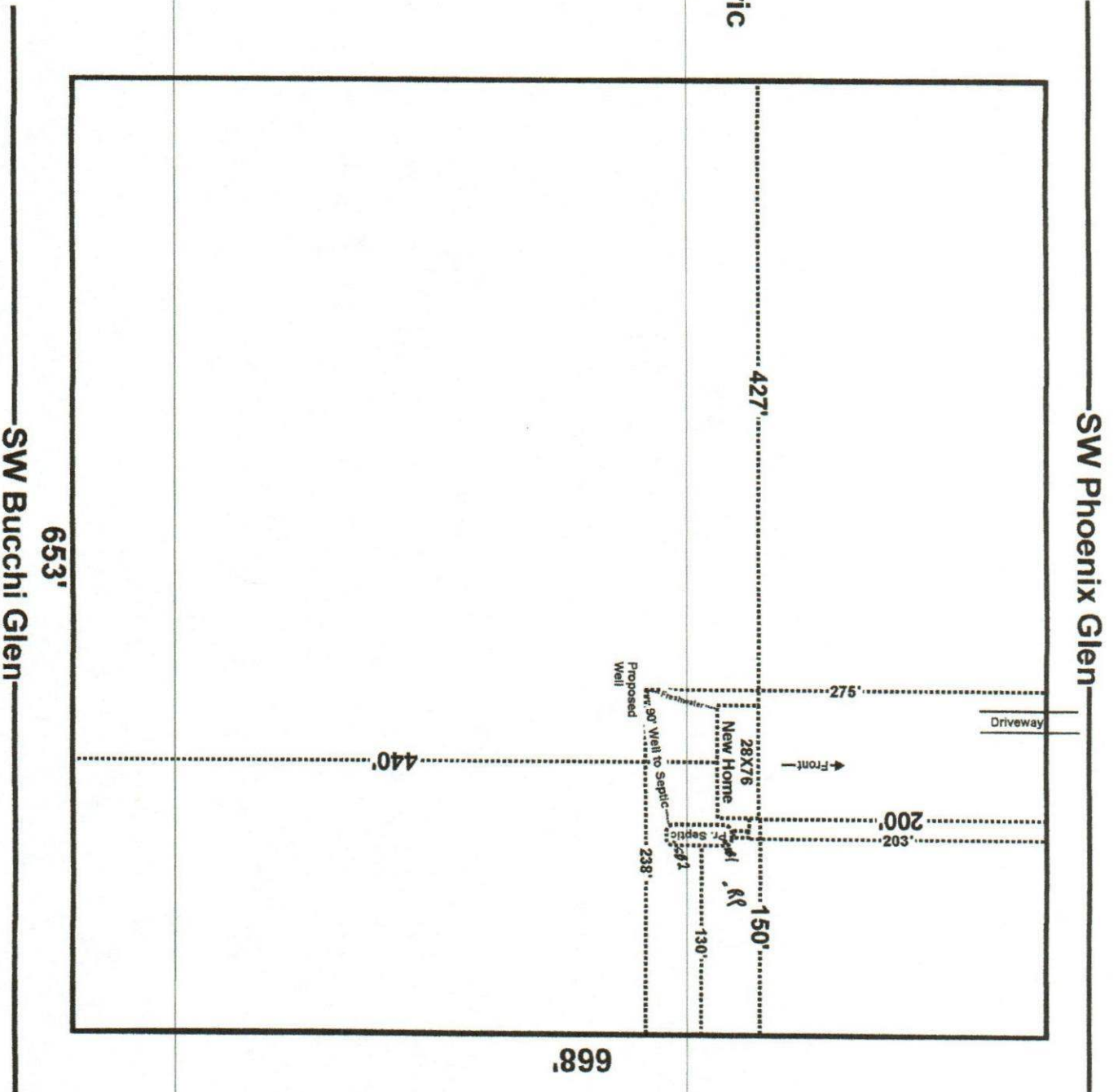


Brady & Jessica Hamric
442 SW Phoenix Glen
Ft. White, FL 32038
Parcel: 04171-002

Scale 1" = 100'


Brody Pack
5/22/23

Hamric
212064
5-30-23





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

PERMIT NO. 23-0397
DATE PAID: 5/30/23
FEE PAID: 310.00
RECEIPT #: AP1968801

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

☒ New System
☐ Repair

☐ Existing System
☐ Abandonment

☐ Holding Tank
☐ Temporary

☐ Innovative

APPLICANT: Brady Hamrick

AGENT: Kameron Keen

EMAIL: _____

MAILING ADDRESS: 474 NE 628th St. Old Town, FL 32680

TELEPHONE: 352-356-1333

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: _____ BLOCK: _____ SUBDIVISION: _____

OSTDS REMEDIATION PLAN? ☐ Y / ☒ N

PROPERTY ID #: 10-75-16-04171-002

ZONING: _____

PLATTED: _____

PROPERTY SIZE: 10 ACRES WATER SUPPLY: ☒ PRIVATE ☐ PUBLIC ☐ I/M OR EQUIVALENT: ☐ Y / ☒ N

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

DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 442 SW Phoenix Gln Ft. White FL 32038

DIRECTIONS TO PROPERTY: FL-475, @ US-Hwy 275, @ Fry Ave, @ SW Phoenix Gln
Parcel on @

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 SFR-MH

4

2128

2

3

4

☐ Floor/Equipment Drains

☐ Other (Specify) _____

SIGNATURE: Kameron Keen 21-2064

DATE: 5/30/2023

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)
Incorporated 62-6.004, FAC