

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

PERMIT NO. 34-0585
DATE PAID: 70.00
FEE PAID: 70.00
RECEIPT #: 70.00

#### APPLICATION FOR CONSTRUCTION PERMIT

| APPLICATION FOR:   |   |
|--|---|
| [ ] New System [X] E   | xisting System [ ] Holding Tank [ ] Innovative bandonment [ ] Temporary [ ]   |
| APPLICANT: Donald  | Davis EMAIL: d. d. towingL  |
| AGENT: SUSAN L   | Fraze TELEPHONE: (386)292-6   |
| MAILING ADDRESS: 346 N   |   |
| TO BE COMPLETED BY APPLICANT<br>BY A PERSON LICENSED PURSUAN<br>APPLICANT'S RESPONSIBILITY T | OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED T TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE O PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR TING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS. |
| PROPERTY INFORMATION   | OSTDS REMEDIATION PLAN? [ Y / N ]   |
| LOT: 12 BLOCK: S   | SUBDIVISION: Lake Jeffery Phase 1 PLATTED:  |
| PROPERTY ID #: 23-35-16  | -02272-01320NING: I/M OR EQUIVALENT: [ Y / N ]  |
| PROPERTY SIZE: 1,265 ACRES   | WATER SUPPLY: [ ] PRIVATE PUBLIC [ ] <= 2000GPD [ ] > 2000GPD   |
| IS SEWER AVAILABLE AS PER 38   |   |
| PROPERTY ADDRESS: 250 N  | WAyburn Place, Lake City FL 32055   |
| DIRECTIONS TO PROPERTY: US   | HN(Main Blvg) - to NW Bascom Norris DR.<br>Hery Rd. Ift onto NW Old Mill Dr., Rt.   |
| onto NW Auburn P   | ace,  |
| BUILDING INFORMATION   | RESIDENTIAL [ ] COMMERCIAL  |
| Unit Type of No. Establishment   | No. of Building Commercial/Institutional System Design<br>Bedrooms Area Sqft Table I, Chapter 62-6, FAC   |
| 1 Inground Suit  | nming 01-0951   |
| 2  |   |
| 3  |   |
| 4  |   |
| [ ] Floor/Equipment Prains   | an L Jang DATE: 6/21/2024   |
| DEF 4015, 06-21-2022 (Obsoleto<br>Incorporated 62-6.004, FAC                                 | es previous editions which may not be used)   |
|  | Page 1 of 4   |

# STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

|      |      |        |          |      |      |      |      |     |          |      |     |      |       |     | OIN             | Per | mit /     | appli   | catio | n Ni     | amh   | er ( | 21   | 7-   | . ^    | 5    | Ø    |
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| le:  | Each | bloc   | k rai    | ores | ents | 10   | feet | and | 1 in     | ch = | 40  | feet |       |     |                 |     |           |         |       |          |       |      |      |      |        |      |      |
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| lpn  | rove | d      |          |      | -    | 2010 | -    |     |          |      | Mo  | A A. | Dec   |     |                 |     |           | Dy Mary | 7/18  | 124      | 7     |      |      |      |        |      |      |
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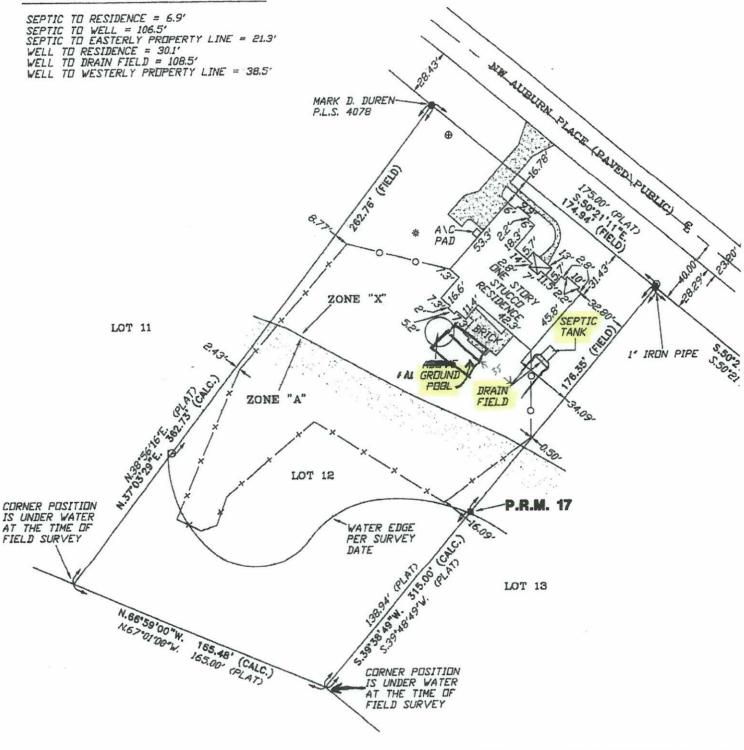
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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

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

24-0585

## FHA STANDARD REQUIREMENTS:



#### CERTIFIED TO

DONALD DAVIS

AMERICAN TITLE SERVICES OF LAKE CITY, INC.
FIDELITY NATIONAL TITLE INSURANCE COMPANY
AMERICAN NEIGHBORHOOD MORTGAGE

Parcel # 23-35-16 02272-013

SEE FIELD BOOK:

PAGE(S) -

### SURVEYOR'S CERTIFI

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER I TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BE IN CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CODE, PURSU

05/21/18 FIELD SURVEY DATE

05/21/18 DRAWING DATE

NOTE: UNLESS IT BEARS THE ORIGINAL SIGNATURE AND THE ORIG AND MAPPER THIS DRAWING, SKETCH, PLAT DR MAP IS FOR