



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

FW

PERMIT NO. 25-0222
DATE PAID: 8/28/25
FEE PAID: 310.00
RECEIPT #: 2244928

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Daniel Ashleys

EMAIL:

AGENT: ASB Construction

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch St. Ft White FL 32038

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

OSTDS REMEDIATION PLAN? ☐ Y ☐ N

LOT: 14 BLOCK: NA SUBDIVISION: Spring Hills West PLATTED: _____

PROPERTY ID # 38-55-15-00484-114 ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 4.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: SW Merciful Pl. Ft. White

DIRECTIONS TO PROPERTY: 47 South Right on CR 240 Left on SW Ichetucknee Ave. Right on Curtain Ln Left on SW Spruce Rd Right on Merciful Pl. to

BUILDING INFORMATION

☒ RESIDENTIAL

☐ COMMERCIAL Prop on Right

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC
1	<u>RV</u>	<u>3</u>	<u>248 8x30</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: William A. Bishop II

DATE: 7/28/25

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

Incorporated 62-6.004, FAC

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 25-0662

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

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

See
Attached

Notes _____

Site Plan submitted by: William B. Bishop II

Plan Approved ☒ Not Approved _____

By [Signature] Columbia Date 7/28/25

County Health Department

812.5125

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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Incorporated 62-6 004 F A C

N
= 40'

2112'

D. ASHLEY

25-2062

