

Permit Application Number 13-2014

Rend

PART II - SITEPLAN

210

[illegible]

Notes:

1 of 24.5 Acres See Attached

Site Plan submitted by:

Plan Approved

By _____

Not Approved

MASTER CONTRACTOR

Date 12/6/13

County Health Department

Columbia CHD

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

REVIEWED



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 13-4614
DATE PAID: 12/31/13
FEE PAID: 318.18
RECEIPT #: 1128008

APPLICATION FOR:

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

APPLICANT: Freddie Reed

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: 546 SW Dortch Street, 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

LOT: na BLOCK: na SUB: na PLATTED:

PROPERTY ID #: 24-68-17-09769-001 ZONING: I/M OR EQUIVALENT: [Y] (N)

PROPERTY SIZE: 24.5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] ☐ <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y] (N) DISTANCE TO SEWER: FT

PROPERTY ADDRESS: SE CR 18, Lake City, FL, 32024

DIRECTIONS TO PROPERTY: 441 South, TL on CR 18, Last property on left before you cross I-75

BUILDING INFORMATION

☒ RESIDENTIAL [] COMMERCIAL

Unit No. Type of Establishment No. of Bedrooms Building Area Sqft Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC

1 SF Residential 3 1748

2

3

N Floor/Equipment Drains N Other (Specify)

SIGNATURE: Rocky D Ford DATE: 11/25/2013



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

386-462-4503
Att. Ronald Clark

PERMIT #: **12-SC-1508491**
APPLICATION #: **AP1128008**
DATE PAID: **12/31/13**
FEE PAID: **3102.00**
RECEIPT #: **23200012**
DOCUMENT #: **PR923807**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: FREDDIE*13-0614 REED

PROPERTY ADDRESS: 26145 SE CR 18 Lake City, FL 32024

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 09769-001 (SECTION, TOWNSHIP, RANGE, PARCEL NUMBER)
(OR TAX ID NUMBER)

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.3065, 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 [900] GALLONS / GPD Existing 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 [375] SQUARE FEET Drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM

A TYPE SYSTEM: [] STANDARD [x] FILLED [] MOUND []
I CONFIGURATION: [x] TRENCH [] BED []

F LOCATION OF BENCHMARK: Nail in fence post west of system site.

I ELEVATION OF PROPOSED SYSTEM SITE [0.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [2.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [16.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

- 1) The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.
2) The 911 address shall be required prior to final approval.

SPECIFICATIONS BY: Rocky D Ford

TITLE: WASH CONTRACT

APPROVED BY: _____

TITLE: Environmental Specialist I

Columbia CHD

DATE ISSUED: 12/08/2013

EXPIRATION DATE: 06/06/2015

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

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