

STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL

CR # 10-8049
PERMIT NO.
DATE PAID:
FEE PAID:
RECEIPT #:

] Repair	[] E	xisting Sys	tem [Holding Tank	[]	Innov	ative
PPLICANT: DAVID & F							
SENT: SPARKS CONS	TRUCTION			TEI	EPHONE	: (386) 75	55-9314
AILING ADDRESS: 42	6 SW COM	MERCE DRIVE,	SUITE J	LAKE CIT	Υ	FL	32055
D BE COMPLETED BY Y A PERSON LICENSE PPLICANT'S RESPONS LATTED (MM/DD/YI)	D FURSUAN	TO 489.105 TO PROVIDE DO	5(3)(m) OR OCUMENTATIO	489.552, FLORIDA	STATUTE LOT	TES. IT	T IS THE
ROPERTY INFORMATIO	N N						
OT: 22 BLOCK	N/A	SUBDIVISION	BLACKBE	RRY FARMS		PLATTEI	D:
ROPERTY ID #: 17-35	S-16-02168-	122	ZONIN	G: RES I/M O	R EQUIT	VALENT:	[NO]
ROPERTY SIZE: 2.5	40 ACRES	WATER SUPPI	LY: [X] PF	EIVATE PUBLIC []<=200	OGPD []>2000GP
SEWER AVAILABLE	AS PER 38	1.0065, FS?	[NO]	DISTA	NCE TO	SEWER:	N/A FT
OPERTY ADDRESS:	BLAC	KBERRY CIRCI	LE				
BROWTONG MA PROPE	RTY: TAK	E 90 WEST, TU	IRN RIGHT O	N LAKE JEFFERY RD	, TURN	LEFT ON	NASH RD,
	TUR			CIR, STAY ON LEFT	AT FOR	K	
ULDING INFORMATI	ON [X]	RESIDENTIAL	. [] COM	CIR, STAY ON LEFT	_	K	
ILDING INFORMATI	ON [X]	RESIDENTIAL	[] COM	CIR, STAY ON LEFT	tutiona	K	
ILDING INFORMATI it Type of . Establishment	ON [X]	RESIDENTIAL No. of Bedrooms	[] COM	MERCIAL Commercial/Insti	tutiona	K	
ILDING INFORMATI it Type of . Establishment HOUSE	ON [X]	RESIDENTIAL No. of Bedrooms	[] COM	MERCIAL Commercial/Insti	tutiona	K	
TILDING INFORMATI it Type of Establishment HOUSE	ON [X]	RESIDENTIAL No. of Bedrooms	[] COM	MERCIAL Commercial/Insti	tutiona	K	
Type of Establishment HOUSE 2	ON [X]	RESIDENTIAL No. of Bedrooms	[] COM	MERCIAL Commercial/Insti	tutiona	K	
JILDING INFORMATI	ON [X]	RESIDENTIAL No. of Bedrooms	[] COM Building Area Soft	MERCIAL Commercial/Insti Table 1, Chapter	tutions 64E-6,	K al Syste	



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

PERMIT #: 12-SC-2248225

APPLICATION #: AP1635713

DATE PAID: 3/5/404

FEE PAID: 3/000

RECEIPT #: 12-P10-4899306

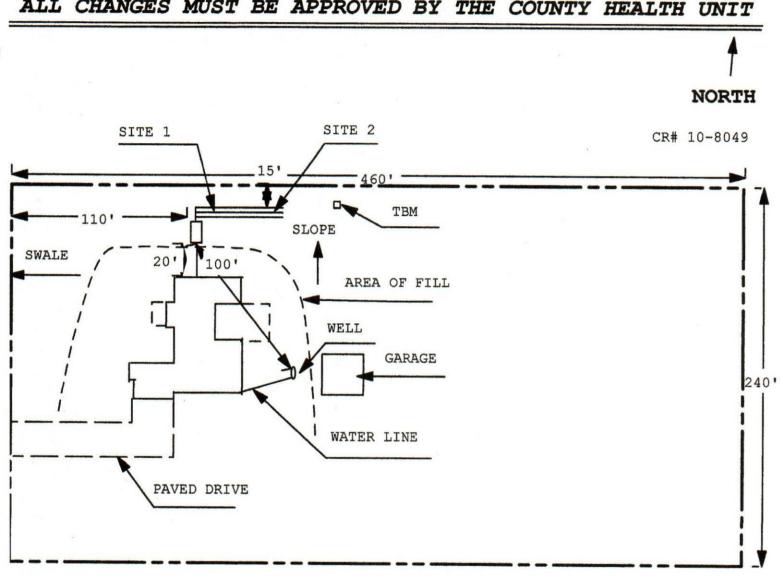
DOCUMENT #: PR1519325

CONSTRUCTION PERMIT	FOR: OSTDS New			
APPLICANT: DAVID**2	21-0215 SENN			
PROPERTY ADDRESS:	BLACKBERRY Lake	City, FL 32055		
LOT: <u>22</u>	BLOCK:	SUBDIVISION:	Blackberry Farms	
PROPERTY ID #: 021	168-122		[SECTION, TOWNSHIP, RANGE, PA - [OR TAX ID NUMBER]	ARCEL NUMBER]
SATISFACTORY PERFOI WHICH SERVED AS PERMIT APPLICATION	RMANCE FOR ANY S A BASIS FOR ISSU SUCH MODIFICAT PERMIT DOES NOT	SPECIFIC PERIOD UANCE OF THIS TIONS MAY RESULT EXEMPT THE A	RTMENT APPROVAL OF SYSTEM D OF TIME. ANY CHANGE IN PERMIT, REQUIRE THE APPLICAL I IN THIS PERMIT BEING MAD PPLICANT FROM COMPLIANCE WIT	
SYSTEM DESIGN AND SE	ECIFICATIONS			
A [] GALLONS N [] GALLONS K [] GALLONS D [500] SQUARE R [] SQUARE A TYPE SYSTEM: I CONFIGURATION: N F LOCATION OF BENCHM I ELEVATION OF PROPO E BOTTOM OF DRAINFIE L D FILL REQUIRED:	S GREASE INTERCEPTOR S DOSING TANK CAPACI FEET New drain FEET N/A [*] STANDARD [[*] TRENCH [MARK: Top of orange s SED SYSTEM SITE ELD TO BE [0.00] INCHES	N/A R CAPACITY [MAXING ITY [] GO] GO GO GO GO GO GO	CAPACITY MUM CAPACITY SINGLE TANK:1250 GA ALLONS @[]DOSES PER 24 HR MOUND [] S FT][ABOVE BELOW] BENCHMARK S FT][ABOVE BELOW] BENCHMARK QUIRED: [] INCHES	S #Pumps [] /REFERENCE POINT /REFERENCE POINT
The system is sized for 400 gpd. THE	r 3 bedrooms with a maxi	mum occupancy of 6 p	ersons (2 per bedroom), for a total estima	ated flow of
SPECIFICATIONS BY:	PAUL LLOYD		TITLE: PSE	
APPROVED BY:	Kelli C Rogers	TITLE: Environ	mental Specialist II	Columbia CHD
DATE ISSUED:	03/08/2021		EXPIRATION DATE	: 09/08/2022
DH 4016, 08/09 (Obso Incorporated: 64E-6	letes all previous e .003, FAC	editions which may	y not be used)	Page 1 of 3

SP

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: > - 0

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



NO WELLS WITHIN 100'

1 INCH = 60 FEET

ite Plan Sub	mitted By Coul 7	Slay Date	3/3/21
lan Approved	Not Approved	Date 3/8/2021	
у	Killeda	Columbia	СРНИ
tes:	0		