



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

FW

PERMIT NO. 23-0447
DATE PAID: 9/13/23
FEE PAID: 310.00
RECEIPT #: 1444846

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Jack Chuce EMAIL: rockyford@windstredm.net
AGENT: A&B Construction TELEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW North 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: 2 BLOCK: NA SUBDIVISION: Sedgefield PLATTED:

PROPERTY ID #: 03-6S-16-03767-302 ZONING: I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 231 SW Rolling Meadows Glen, Ft. White, FL

DIRECTIONS TO PROPERTY: TL onto NW main Blvd, TR onto FL-47S, TL onto SW Rolling Meadows Glen

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	SF Residential	1	1500	
2				
3	Storage Shed	0	160	
4				

REVISED
A B
E H

☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: William A. Bishop II DATE: 9-7-23

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 23-0647

Cruce

PART II - SITEPLAN

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

See
attached

Notes:

RECEIVED
EH 9/18/23

Site Plan submitted by: William A. Bishop II master contractor
Plan Approved [Signature] Not Approved _____ Date 9/18/23
By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

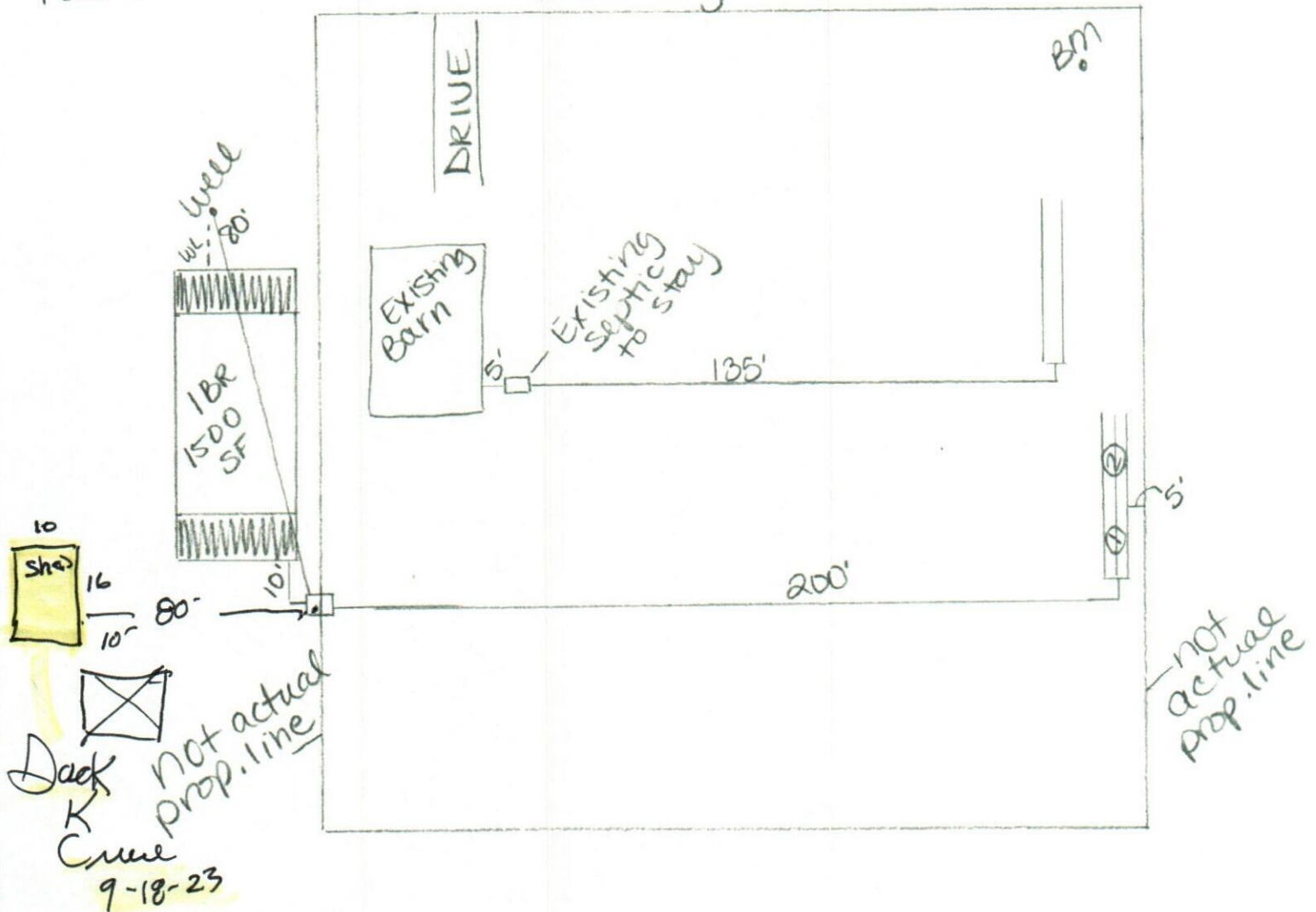
23-0647
Cruce
lin = 40ft.
9-7-23

↓ N



1 acre of 5.

Rolling Meadows Gln.



William D. Bishop II

REVISED
EH