

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

PERMIT NO. 22 - 108
DATE PAID: 4 9 2 2 3
RECEIPT #: 4 9 2 1 2

APP	LICATION F	OR CONST	RUCTION I	PERMIT	_		
APPLICATION FOR: [] New System [] Repair	[] Ex	isting Sys	tem [] Hol	ding Tank	[]	Innovative
APPLICANT: Anna	Marlowe				EMA	IL:	
AGENT: Blake Cons	truction Comp	oany			TELE	PHONE: 3	86-754-5810
MAILING ADDRESS:							
TO BE COMPLETED B BY A PERSON LICEN APPLICANT'S RESPO PLATTED (MM/DD/YY	SED PURSUANT	TO 489.10 PROVIDE D	5(3)(m) OF OCUMENTATI	ON OF THE	2, FLORIDA HE DATE THE DRY GRANDFA	STATUTE LOT WA	S. IT IS THE AS CREATED OR
PROPERTY INFORMAT	ION				TO THE RESERVE TO THE	EDIATIO	N PLAN? [Y/N]
LOT: 3 BLOCK:	sur	BDIVISION:	Westwind	Estates		PL	ATTED:
PROPERTY ID #:	7-4s-16-0279	1-103	ZONING	: _A-3	_ I/M OR	EQUIVAL	ENT: [Y/®]
PROPERTY SIZE: 5	_ ACRES W	ATER SUPPLY	: [] PRI	VATE P	UBLIC []	=2000GI	PD []>2000GPD
IS SEWER AVAILABL	E AS PER 381	0065, FS?	[Y/M]		DISTA	NCE TO	SEWER: N/A FT
PROPERTY ADDRESS:	247 SW M	Madison Ct	Lake City,	FL 3202	4		
Christian academy				ead west	to Madison	Ct on le	ft just past the Lake C
BUILDING INFORMAT	ION	[√] RESI	DENTIAL	ţ] COMMERCI	AL	-
Unit Type of No Establishme	nt	No. of Bedrooms			rcial/Insti I, Chapter		al System Design FAC
1 House		3	1920			-	
3				-		**************************************	
4							
	ment Drains			.fy)			
SIGNATURE:B	ake N Lunde 11,	President	Verified by pdfFiller 09/06/2022		D.	ATE:	09/06/2022
DEP 4015, 06-21-2 Incorporated 62-6		es previou	s editions	which r	may not be	used)	Page 1 of 4



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

PERMIT #: 12-SC-2566499

APPLICATION #: AP1879802

DATE PAID: 9/9/22

FEE PAID: ____

RECEIPT #: __

DOCUMENT #: PR1828874

CONSTRUCTION PERMIT FOR: OSTDS New	The Control of the Co	
APPLICANT: ANNA**22-0768 MARLOWE	TOTAL STATE OF STATE	
PROPERTY ADDRESS: 247 SW MADISON	Lake City FL 32024	201
LOT: 3 BLOCK:	SUBDIVISION: WESTWIND	
PROPERTY ID #: 02791-103	[SECTION, TOWNSHIP, RANGE, PARC [OR TAX ID NUMBER]	TEL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN 381.0065, F.S., AND CHAPTER 64E-6 SATISFACTORY PERFORMANCE FOR ANY WHICH SERVED AS A BASIS FOR ISSPERMIT APPLICATION. SUCH MODIFICATION ISSUANCE OF THIS PERMIT DOES NOT STATE, OR LOCAL PERMITTING REQUIRED FOR	SPECIFIC PERIOD OF TIME. ANY CHANGE IN SUANCE OF THIS PERMIT, REQUIRE THE APPLICANT ATIONS MAY RESULT IN THIS PERMIT BEING MADE IT EXEMPT THE APPLICANT FROM COMPLIANCE WITH	S NOT GUARANTEE MATERIAL FACTS,
SYSTEM DESIGN AND SPECIFICATIONS		
T [900] GALLONS / GPD	Septic Tank CAPACITY	
A [] GALLONS / GPD	N/A CAPACITY	
N [] GALLONS GREASE INTERCEPTO	OR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALI	LONS]
	CITY []GALLONS @[]DOSES PER 24 HRS	
D [375] SQUARE FEET Drain R [] SQUARE FEET N/ A TYPE SYSTEM: [X] STANDARD I CONFIGURATION: [X] TRENCH [N F LOCATION OF BENCHMARK: Nail in pine with	A SYSTEM [] FILLED [] MOUND []] BED []	
	[18.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/RI	
	[48.00][INCHES FT][ABOVE BELOW] BENCHMARK/RI	EFERENCE POINT
L COOL		
	EXCAVATION REQUIRED: [0.00] INCHES ximum occupancy of 6 persons (2 per bedroom), for a total estimate	d flow of
H E		
R		
SPECIFICATIONS BY: Dustin W Jones	TITLE: Environmental Specialist	
APPROVED BY:	TITLE: Environmental Specialist II	Columbia CHD
DATE ISSUED: 09/20/2022	EXPIRATION DATE:	03/21/2024
DH 4016, 08/09 (Obsoletes all previous Incorporated: 64E-6.003, FAC	editions which may not be used)	Page 1 of 3
v 1.1.4	AP1879802 SE1727467	



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STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number_____

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DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)