



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

CR # 10-9007

PERMIT NO. 22-0681  
DATE PAID: 8/18/22  
FEE PAID: 310.00  
RECEIPT #: 1873343

APPLICATION FOR:

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

APPLICANT: Christopher Greene

NEHlesrebekah@gmail.com

AGENT: Vertical Plumbing

TELEPHONE: (907) 947-1653

MAILING ADDRESS: 187 SE COUNTRY CLUB ROAD

LAKE CITY

FL 32025

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: N/A BLOCK: N/A SUBDIVISION: LITTLE PINES FARM PLATTED: \_\_\_\_\_

PROPERTY ID #: 02-7S-16-04111-118 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 9.570 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☐  $\leq 2000\text{GPD}$  ☐  $> 2000\text{GPD}$

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 608 SW QUARRY CIRCLE FT WHITE

DIRECTIONS TO PROPERTY: FROM FORT WHITE, TAKE COUNTY ROAD 18 WEST. TURN RIGHT ON SOUTH WEST HAWTHORNE TERRACE. TURN LEFT ON SOUTH WEST QUARRY CIRCLE. SITE IN BACK ON SOUTH SIDE.

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	MOBILE HOME	3	1,410	1040 (RD) 8/16/22
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: [Signature]

DATE: 08/05/2022

Rec'd 8/16/22





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

PERMIT #: **12-SC-2556274**  
APPLICATION #: **AP1873343**  
DATE PAID: **8.8.22**  
FEE PAID: **310.00**  
RECEIPT #:  
DOCUMENT #: **PR1813227**

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: CHRISTOPHER\*\*22-0681 GREENE  
PROPERTY ADDRESS: 608 SW QUARRY Fort White, FL 32038  
LOT: BLOCK: SUBDIVISION:  
PROPERTY ID #: 04111-118 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]  
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, 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 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: [X] STANDARD [ ] FILLED [ ] MOUND [ ]  
I CONFIGURATION: [X] TRENCH [ ] BED [ ]

F LOCATION OF BENCHMARK: Nail in 12" oak E of system site

I ELEVATION OF PROPOSED SYSTEM SITE [ 24.00 ] [ INCHES ] FT [ ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 42.00 ] [ INCHES ] FT [ ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

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

O 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.  
T  
H  
E  
R

SPECIFICATIONS BY: PAUL LLOYD TITLE: PSE

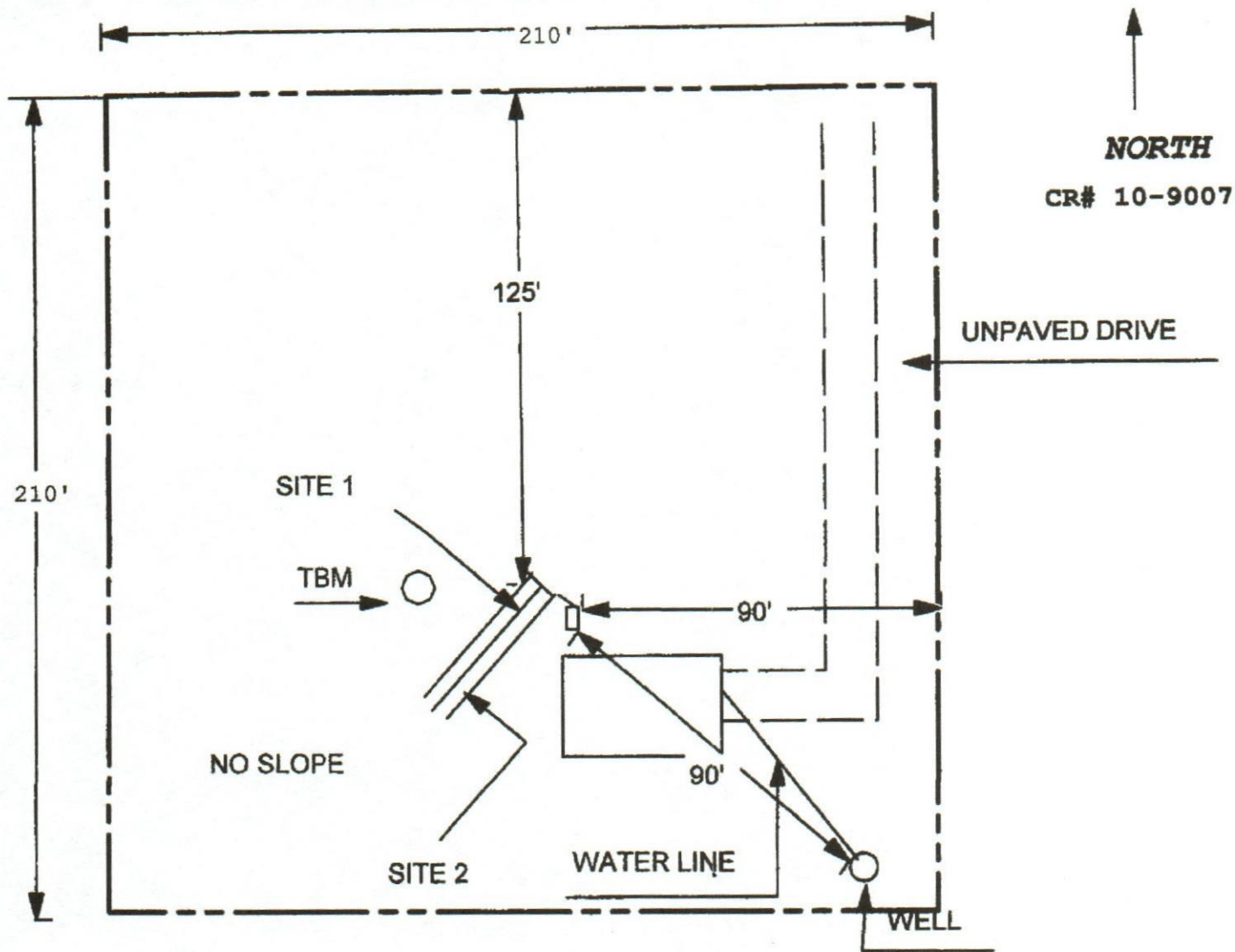
APPROVED BY: Sallie A Ford TITLE: Environmental Health Director Columbia CHD

DATE ISSUED: 08/18/2022 EXPIRATION DATE: 02/18/2024

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)  
Incorporated: 64E-6.003, FAC

Application for Onsite Sewage Disposal System  
Construction Permit. Part II Site Plan  
Permit Application Number: 22-0681

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



0 WELLS WITHIN 100'

1 INCH = 40 FEET

Site Plan Submitted By Paula Ray Date 8/4/22  
Plan Approved ☒ Not Approved ☐ Date 8-10-22  
Sally Ford EH Director Columbia CPHU

Notes: \_\_\_\_\_