



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

PERMIT NO. 25-2264  
DATE PAID: 3/29/25  
FEE PAID: 20.00  
RECEIPT #: 2199231

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

☐ New System  
☐ Repair



Existing System  
Abandonment

☐ Holding Tank  
☐ Temporary

☐ Innovative  
☐

APPLICANT:

Cody Griffith

EMAIL: lizzie@eliteoutdoorbuildings.com

AGENT: Lizzie Brooks

TELEPHONE: 386-623-0420

MAILING ADDRESS: 179 SW Sunrise Way, Lake City, FL 32024

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: 14 BLOCK: A SUBDIVISION: Troy Pines

PLATTED: \_\_\_\_\_

PROPERTY ID #: 10-4S-16-02890-002

ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 0.922 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ]

DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 179 SW Sunrise Way, Lake City, FL 32024

DIRECTIONS TO PROPERTY: \_\_\_\_\_

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	Accessory Structure	0	700	
2				
3				
4				

[ ] Floor/Equipment Drains [ ] Other (Specify) \_\_\_\_\_

SIGNATURE: Ch...

DATE: 3-12-25

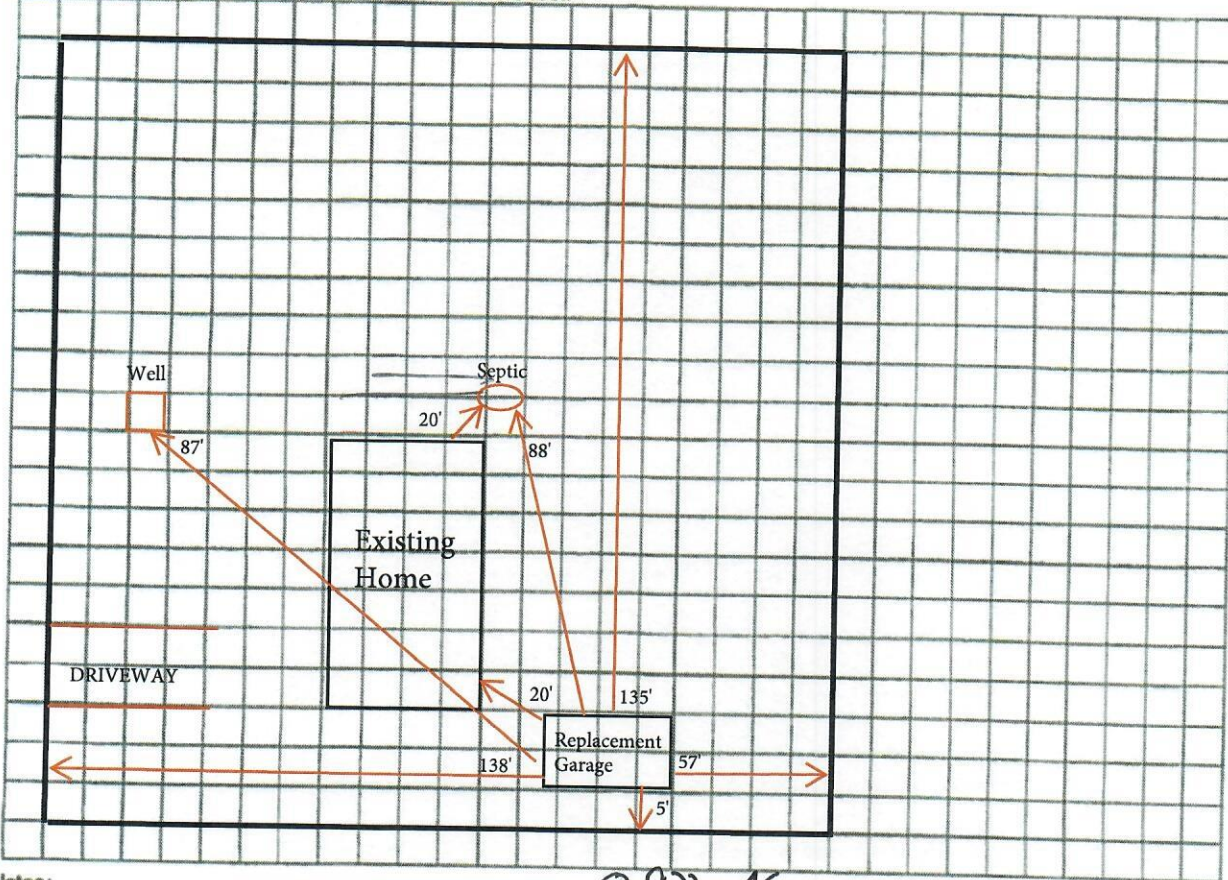


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Permit Application Number 25-0264

----- PART II - SITEPLAN -----

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



Notes: 0.922 AC

Site Plan submitted by: Lyric Mc

Plan Approved ☒

Not Approved ☐

By [Signature]

Date 3-16-25

County Health Department

3/24/25

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT