

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

PERMIT #	12-SC-2852109
APPLICATION #	#: AP2040940
DATE PAIL	2/19/24
FEE PAIL	510.ce
RECEIPT #	†:

CONSTRUCTION PERMIT H		
APPLICANT: NILDA**24	4-0159 CROOKE-VALES	the Carrier of Carrier
PROPERTY ADDRESS:	SW PLEASANT HILL Fort White, FL 32038	
LOT: 5	BLOCK: SUBDIVISION: Pleasant Hill Farms	as and who
PROPERTY ID #: 0416	[SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	EL NUMBER]
WHICH SERVED AS P PERMIT APPLICATION. ISSUANCE OF THIS	MANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT	NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE
SYSTEM DESIGN AND SPI	ECIFICATIONS	
T [1.050] GALLON	NS / GPDNew Multi-Chambered Septic CAPACITY	
A [] GALLON		
N [] GALLONS	GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALL	ONS]
K [] GALLONS	DOSING TANK CAPACITY []GALLONS @[]DOSES PER 24 HRS	#Pumps []
D [500] SQUARE	FEET Drainfield SYSTEM	
R [] SQUARE		
	[*] STANDARD [] FILLED [] MOUND []	
I CONFIGURATION:	[*] TRENCH [] BED []	
N	Noil in pink ribban in fance past near site	
F LOCATION OF BENCHM		
I ELEVATION OF PROPOS	SED SYSTEM SITE [13.00] [INCHES FT] [ABOVE BELOW BENCHMARK/RE	FERENCE POINT
E BOTTOM OF DRAINFIE	LD TO BE [43.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/RE	FERENCE POINT
L		
D FILL REQUIRED:	[0.00] INCHES EXCAVATION REQUIRED: [] INCHES	
	r 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated	d flow of
O 400 gpd.		
T		
Н		
E		
R		
SPECIFICATIONS BY:	(Joshua) Kameron Keen TITLE: CEHP	
APPROVED BY:	TITLE: Environmental Specialist I	Columbia CHD
DATE ISSUED:	02/23/2024 EXPIRATION DATE:	08/23/2025
DEP 4015, 06-21-2022	(Obsoletes previous editions which may not be used)	venues de la
Incorporated 62-6.004	3 To adjust the Control of the Contr	Page 1 of 3

DOCUMENT #: PR2047255

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

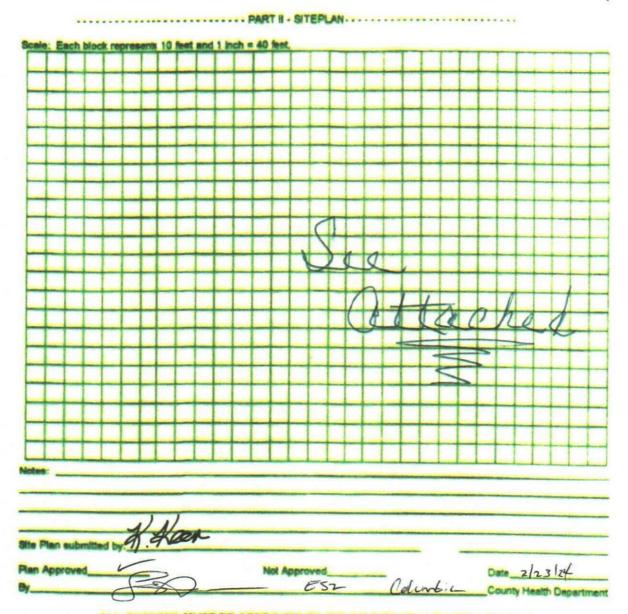
PERMIT NO. 24-8150
DATE PAID: 211914
FEE PAID:
RECEIPT #: 2044900

APPLICATION FOR CONSTRUCTION PERMIT APPLICATION FOR: [K] New System [] Existing System
[] Abandonment [] Holding Tank [] Innovative [] Temporary [] [] Repair APPLICANT: Keen TELEPHONE: 352-356-1333 MAILING ADDRESS: 474 NE 628th St. Old Town, FL 32680 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 / 🚳] LOT: 5 BLOCK: SUBDIVISION: Pleasant Hill Falms PLATTED: PROPERTY ID #: 09-075-16-64161-10-5 ZONING: _____ I/M OR EQUIVALENT: [Y / 10] PROPERTY SIZE: S ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / 20] DISTANCE TO SEWER: ____FT PROPERTY ADDRESS: SW Pleasant Hill Gln. Fort White 32038 DIRECTIONS TO PROPERTY: Take 47 S, TL on Geranium, TL on Terrell, TR on Pleason Hill, last place on R. BUILDING INFORMATION [A] RESIDENTIAL [] COMMERCIAL Unit Type of No. of Building Commercial/Institutional System Design Establishment Bedrooms Area Sqft Table I, Chapter 62-6, FAC SFR-MH 4 1820 3 [] Floor/Equipment Drains []/ Other (Specify)

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Incorporated 62-6.004, FAC

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION APPLICATION FOR CONSTRUCTION PERMIT

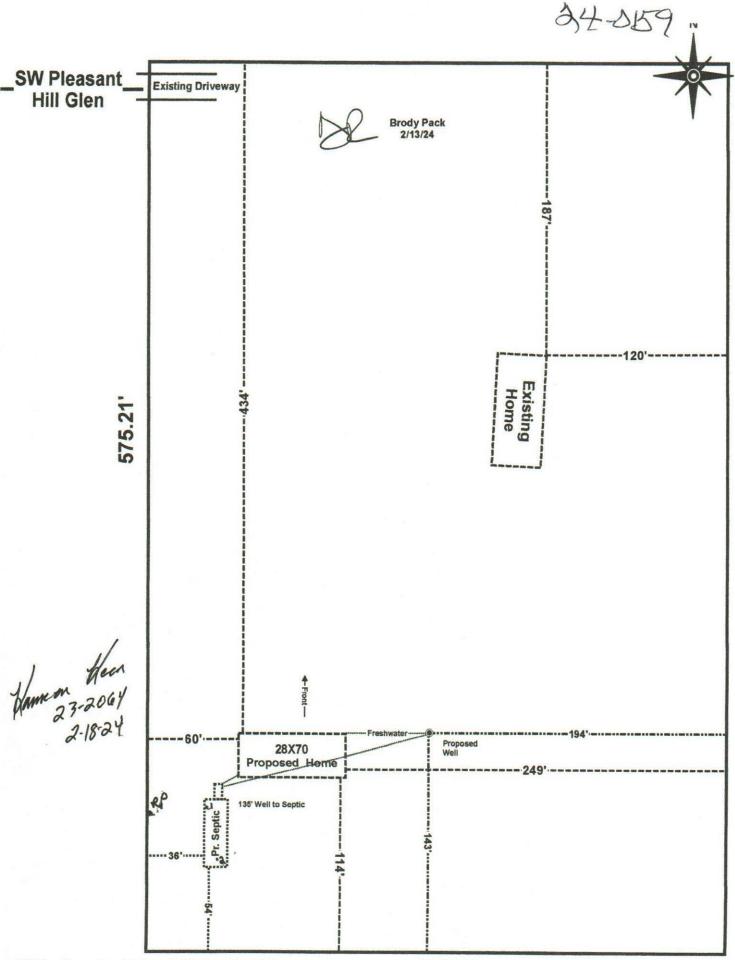
Permit Application Number_



ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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Nilda Crooke-Vales / Alejandra Mier Parcel: 09-7S-16-04161-105

378.52' Scale 1" = 60'

Existing Home Address 526 SW Pleasant Hill Glen