



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

PERMIT NO. 22-0735  
DATE PAID: 10/25/23  
FEE PAID: 318.88  
RECEIPT #: 2026722

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Angel Rogers EMAIL: \_\_\_\_\_  
AGENT: Swanner Sepic TELEPHONE: (239) 910-7555

MAILING ADDRESS: 18081 185th Rd Live Oak 32060

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: 13 BLOCK: \_\_\_\_\_ SUBDIVISION: Hawbards PLATTED: \_\_\_\_\_

PROPERTY ID #: 21-55-17-09308-016 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☒ Y / ☐ N

PROPERTY SIZE: 5.51 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

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

PROPERTY ADDRESS: SW Churchill Way Lake City 32025

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	<u>MH</u>	<u>3</u>	<u>1144</u>	
2				
3				
4				

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

SIGNATURE: James W. Latta Dale W. Latta DATE: 10-19-23

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)  
Incorporated 62-6.004, FAC





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

PERMIT #: **12-SC-2806224**  
APPLICATION #: **AP2006702**  
DATE PAID: **10.20.23**  
FEE PAID: **310.00**  
RECEIPT #:  
DOCUMENT #: **PR2027472**

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: ANGEL\*\*23-0735 ROGERS  
PROPERTY ADDRESS: SW CHURCHILL Lake City, FL 32025  
LOT: P/O 13 BLOCK: SUBDIVISION: Howland S/D  
PROPERTY ID #: 09308-016 [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: [ ] STANDARD [x] FILLED [ ] MOUND [ ]  
I CONFIGURATION: [x] TRENCH [ ] BED [ ]

N  
F LOCATION OF BENCHMARK: Nail in tree E of system with pink ribbon

I ELEVATION OF PROPOSED SYSTEM SITE [ 24.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [ 28.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [ 14.00 ] INCHES EXCAVATION REQUIRED: [ ] INCHES

O  
T  
H  
E  
R  
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.

SPECIFICATIONS BY: Kelli Rogers TITLE: CEHP

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

DATE ISSUED: 11/02/2023 EXPIRATION DATE: 05/02/2025

DEF 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

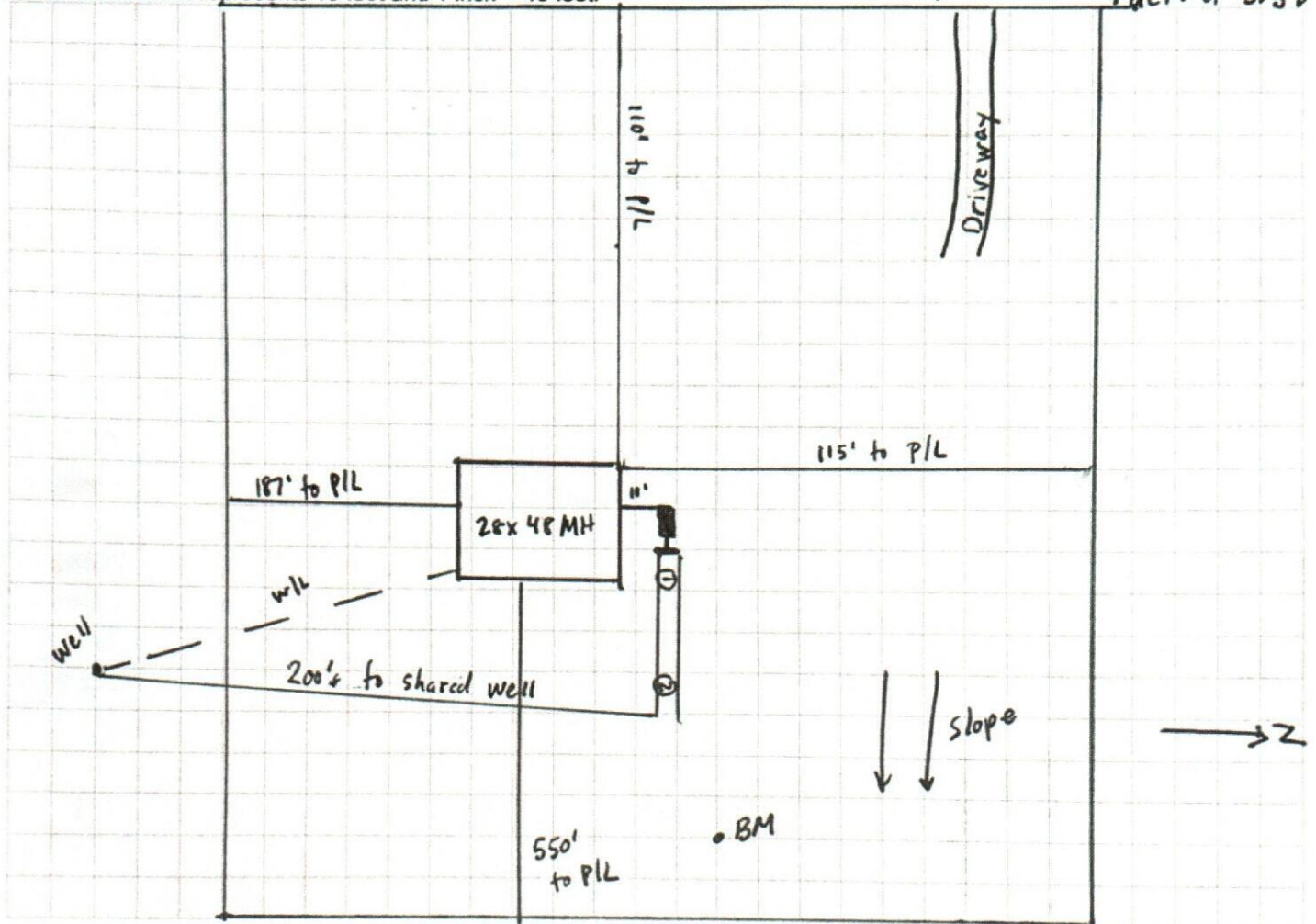
23-0734

PART II - SITEPLAN

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

Swchurch hill Way

1 acre of 5.51



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

KRM By 10/1/2023

Site Plan submitted by: James Walker Oak Water

Plan Approved X Not Approved \_\_\_\_\_

By [Signature] Date 10/30/23 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

Incorporated: 62-6.004, F.A.C.