



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

Revised

# 63449

PERMIT NO.  
DATE PAID:  
FEE PAID:  
RECEIPT #:

24-0044  
2-1-24  
\$10.00  
2037009

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT:

Advanta IRA Services LLC

MAIL: rockyford@

AGENT:

A&B Construction

WINDSTREAM.NET  
TELEPHONE: 386-497-2311

MAILING ADDRESS:

546 SW DORTCH ST, FT. WHITE, FL. 32038

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: NA BLOCK: NA SUBDIVISION: NA PLATTED:

PROPERTY ID #: 18-3S-17-05001-015 ZONING: I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 4 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

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

PROPERTY ADDRESS:

NW McCall TER, Lake City, FL.

DIRECTIONS TO PROPERTY:

TR onto US-441 N, TL onto NW Valdosta Rd, TR onto NW McCall Ter.

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 SF Residential 3 1568

2

3

4



☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE:

William A. Bishop II

DATE:

4-24-24

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-2846563  
APPLICATION #: AP2037009  
DATE PAID: 2/1/24  
FEE PAID: 310.00  
RECEIPT #: \_\_\_\_\_  
DOCUMENT #: PR2079809

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: Advanta IRA Services \*\*24-0094 LLC  
PROPERTY ADDRESS: 249 NW MCCALL Lake City, FL 32055  
LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_  
PROPERTY ID #: 05061-015 [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 [ 1,350 ] GALLONS / GPD New Multi-Chambered Septic 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 [ 688 ] SQUARE FEET Drainfield SYSTEM  
R [ ] SQUARE FEET N/A SYSTEM  
A TYPE SYSTEM: [ ] STANDARD [ ] FILLED [X] MOUND [ ]  
I CONFIGURATION: [X] TRENCH [ ] BED [ ]  
N  
F LOCATION OF BENCHMARK: Nail in fence post W of site  
I ELEVATION OF PROPOSED SYSTEM SITE [ 12.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 6.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
L  
D FILL REQUIRED: [ 24.00 ] INCHES EXCAVATION REQUIRED: [ 27.00 ] 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 Excavate entire spodic encountered as well as SCL fill. Contractor has requested 1350 galloob tank with 688 sqft of  
R drainfield, minimum required is a 900 gallon tank with 375sqft of drainfield.

SPECIFICATIONS BY: William D Bishop II TITLE: Master Septic Contractor  
APPROVED BY: Kyle B Roberts TITLE: Environmental Manager Columbia CHD  
DATE ISSUED: 04/26/2024 EXPIRATION DATE: 10/26/2025

DEP 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

24-0094

Advanta IRA Services LLC

1-SITEPLAN

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

See  
attached

Notes:



Site Plan submitted by:

William D. Bishop II

master contractor

Plan Approved

Not Approved

Date

By

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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Incorporated: 02-0.004.F.A.C.

