

STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23-0592

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

See  
Attached

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

Site Plan submitted by: John D. Jones

Plan Approved ☒ Not Approved ☐ Date 8/25/23  
By [Signature] ES2 Columbia County Health Department

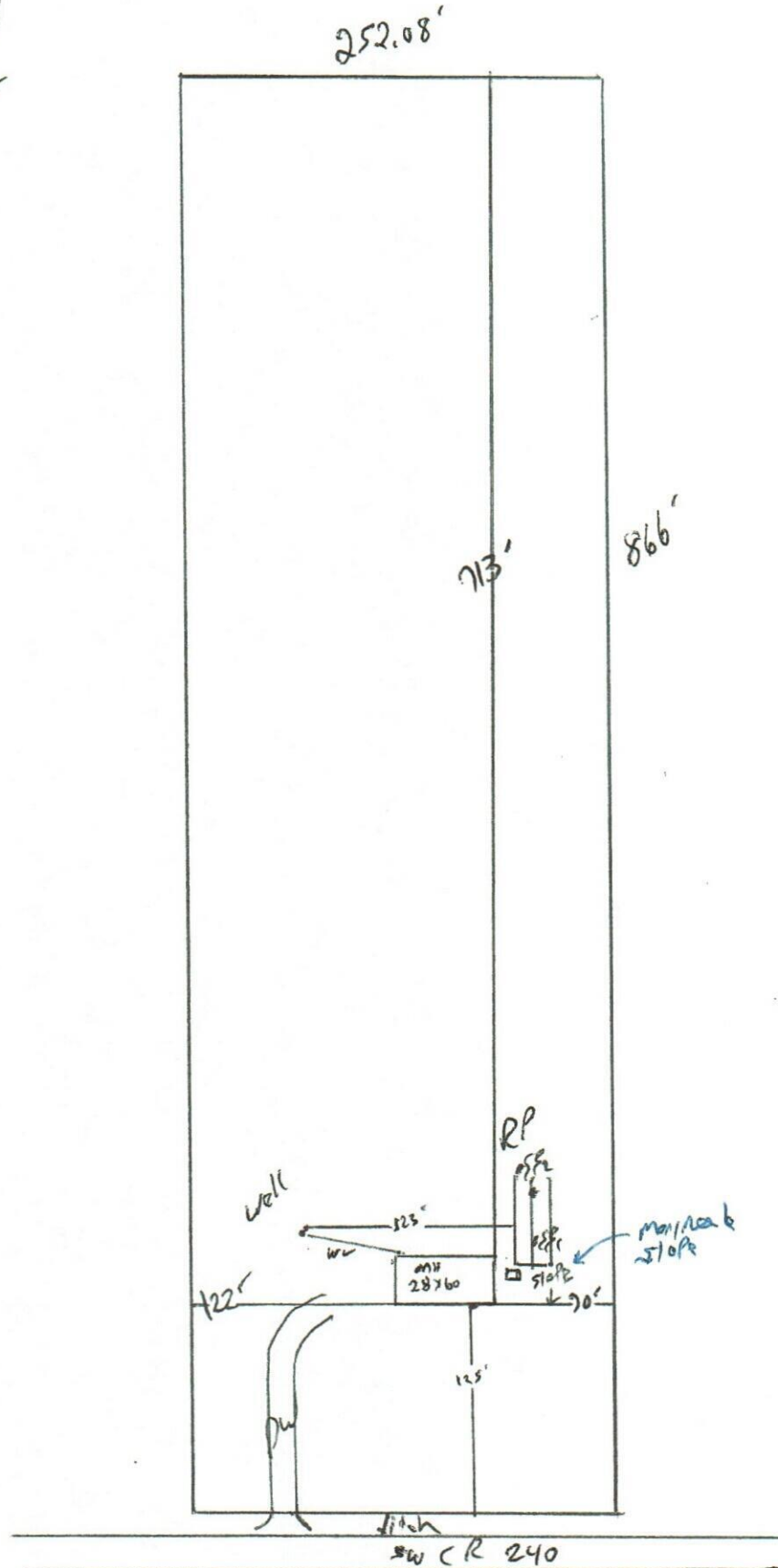
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

23-0593

1" = 100'  
Jmhl

N  
4

> 75' to Pertinent  
Features





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

23.0593  
PERMIT NO. 23.0593  
DATE PAID: 8.16.23  
FEE PAID: 310.00  
RECEIPT #: 310.00

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Caleb May/Liz Matilde EMAIL: jeffhardeehep@aol.com

AGENT: Jeff Hardee TELEPHONE: 3562-949-0592

MAILING ADDRESS: 6450 NW 72 Lane Chiefland, FL 32626

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: 6 BLOCK: — SUBDIVISION: Mandolin Farms PLATTED: —

PROPERTY ID #: 03497-106 ZONING: — I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 5.01 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [ ] ☐ ≤2000GPD [ ] >2000GPD

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

PROPERTY ADDRESS: 7173 SW CR 204, Lake City

DIRECTIONS TO PROPERTY:  Hwy 97 +/R SW CR 240 to DW on

Right

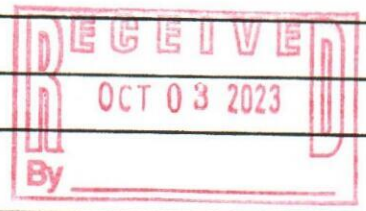
BUILDING INFORMATION

☒ 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>Mobile Home</u>	<u>3</u>	<u>1560</u>	
2				
3				
4				

[ ] Floor/Equipment Drains [ ] Other (Specify) —

SIGNATURE: Jeff Hardee DATE: 8-7-23







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

PERMIT #: **12-SC-2766133**  
APPLICATION #: **AP1984043**  
DATE PAID: **8.16.23**  
FEE PAID: **310.00**  
RECEIPT #:  
DOCUMENT #: **PR1985809**

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: MATILDE\*\*23-0593 LIZ  
PROPERTY ADDRESS: 7173 SW CR 240 Lake City, FL 32024  
LOT: 6 BLOCK: SUBDIVISION: Mauldin Farms  
PROPERTY ID #: 03497-106 [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 [ ]

N  
F LOCATION OF BENCHMARK: Nail in oak (N of site)

I ELEVATION OF PROPOSED SYSTEM SITE [ 17.00 ] [ INCHES ] FT [ ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [ 31.00 ] [ INCHES ] FT [ ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [ 4.00 ] INCHES EXCAVATION REQUIRED: [ ] INCHES

O

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H

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SPECIFICATIONS BY: Jeffrey W Hardee TITLE: CEHP

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

DATE ISSUED: 10/03/2023 EXPIRATION DATE: 04/03/2025

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

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