



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

PERMIT NO. 22-1657
DATE PAID: 7/29/22
FEE PAID: 60.00
RECEIPT #: 7872811

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Debra Petersen

EMAIL: debrapetersen5677@gmail

AGENT: _____

TELEPHONE: 386-292-3768

MAILING ADDRESS: 350 SW Meadow Terrace, 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: 20 BLOCK: _____ SUBDIVISION: Southwood Meadows PLATTED: 3/2/69

PROPERTY ID #: 01-55-16-03405 (16692) ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☐ N

PROPERTY SIZE: 1.25 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS: 350 SW Meadow Terrace, 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	<u>single family</u>	<u>3</u>	<u>1250</u>	
2	<u>Kitchen</u>	<u>-</u>		ORIGINAL ATTACHED
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Debra Petersen

DATE: 7-28-22

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

Incorporated 62-6.004, FAC

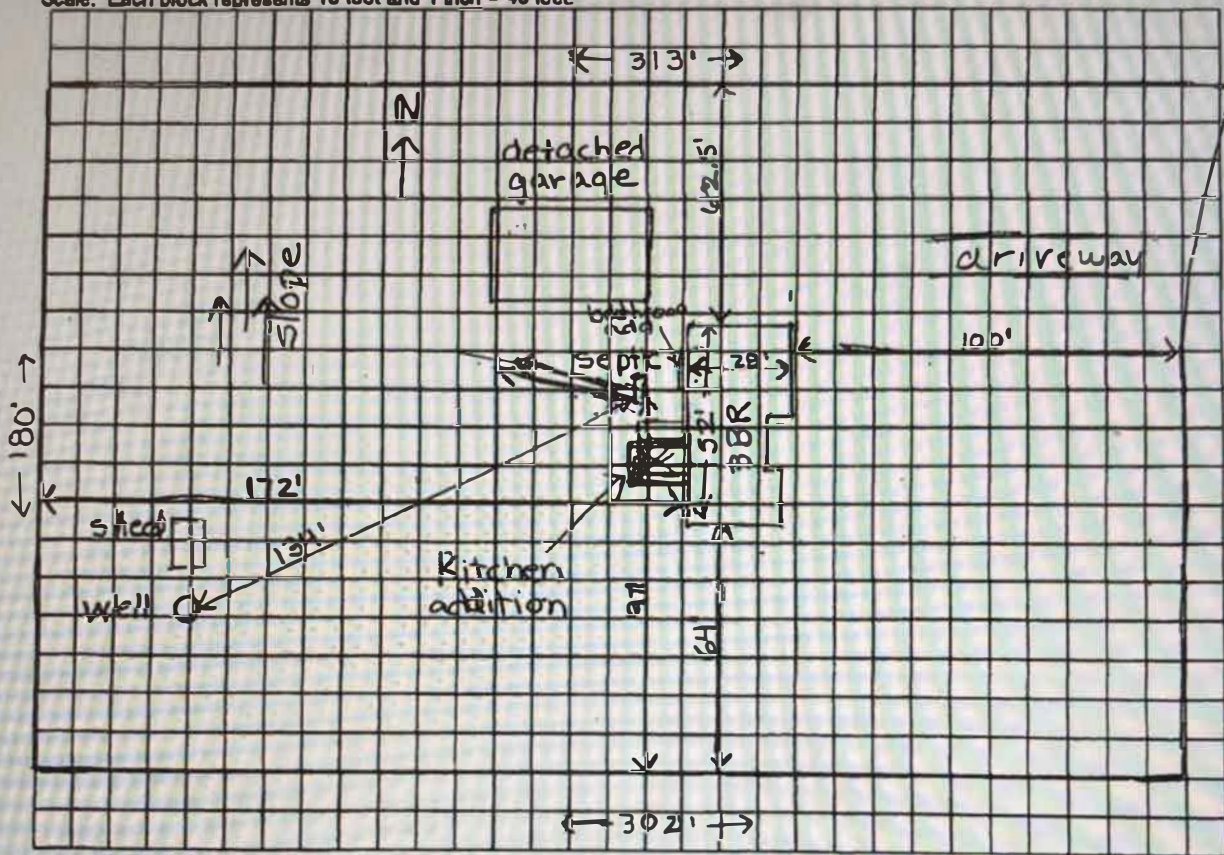
Page 1 of 4

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 22-0657

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

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



Notes:

Site Plan submitted by: Debra Petersen

7-28-22

Plan Approved X

Not Approved

Date 8/6/22

By: [Signature]

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.