STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	Permit Application	Number_	20-0632				
Lane							
Lan ac	PART II - SITEPLAN						
Scale: 1 inch = 40 feet.	210'						
	0/0						
	ळ	32'					
NA			°Bm				
101		1111	47)				
	82'	@					
	l hol	(1)					
	DR IVE						
300		10					
	3BR augs SF						
330' 10'	108 St		85				
	7,46,97						
45	4334						
	wi						
1 acre of 10.05							
1 acre of 10.05	140						
	67						
	weed 187						
Notes:							
1 acre of	7 10.05						
	-						
Site Plan submitted by:	llian D. Biolog II	MAST	ER CONTRACTOR				
Plan Approved	Not Approved		Date 7-22-20				
By Jun 9	Super Colyn	bia Cou	unty Health Department				
ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT							

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC

(Stock Number: 5744-002-4015-6)

Page 2 of 4



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO.	26-06
DATE PAID:	16/2/20
FEE PAID:	310166
RECEIPT #:	1550348

APPLICATION FOR: [X] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Dustin and Laurie Lane
AGENT: ROCKY FORD, A & B CONSTRUCTION TELEPHONE: 386-497-2311
MAILING ADDRESS: 546 SW Dortch Street, 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
LOT: NA BLOCK: NA SUB: NA PLATTED:
PROPERTY ID #: 36-38-16-02611-032 ZONING: I/M OR EQUIVALENT: [Y /N]
PROPERTY SIZE: 10.05 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER:FT
PROPERTY ADDRESS: 665 NW Mission Ridge Ct, Lake City, Fl
DIRECTIONS TO PROPERTY: 90 W, TR on Bascom Nom's, pass
Lowes, TR on mission Ridge Ct, and Lot on
right. Gate combo: 4569#
BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 2 2 0
SF Residential 3 2498
3
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: Willia O. Bishop II DATE: 7/22/2020



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

PERMIT #: 12-SC-2135949 APPLICATION #: AP1550348 DATE PAID: 817/20

FEE PAID: 3,0.00

RECEIPT #:____ DOCUMENT #: PR1391923

CONSTRUCTION PERMIT	FOR: OSTDS New			
APPLICANT: DUSTIN*	*20-0632 LANE			y
PROPERTY ADDRESS:	665 NW MISSION RIDGE	Lake City, FL 320	55	
LOT:	BLOCK:	SUBDIVISION:		
PROPERTY ID #: 026	611-032		[SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	L NUMBER]
SATISFACTORY PERFO WHICH SERVED AS PERMIT APPLICATION ISSUANCE OF THIS	ND CHAPTER 64E-6, F RMANCE FOR ANY SPE A BASIS FOR ISSUANO	C.A.C. DEPART CIFIC PERIOD CE OF THIS P NS MAY RESULT EXEMPT THE APP	ERMIT, REQUIRE THE APPLICANT IN THIS PERMIT BEING MADE PLICANT FROM COMPLIANCE WITH	NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND S	PECIFICATIONS			
A [] GALLO N [] GALLON		N/A APACITY [MAXIMU	CAPACITY CAPACITY OM CAPACITY SINGLE TANK:1250 GALLO LLONS @[]DOSES PER 24 HRS	
R [] SQUARE A TYPE SYSTEM:		FILLED []	MOUND []	
	MARK: Nail in pine E. of si	te.		
E BOTTOM OF DRAINFI	ELD TO BE	[42.00] [INCHES	FT] [ABOVE / BELOW] BENCHMARK/RE	
			UIRED: [] INCHES ersons (2 per bedroom), for a total estimated	flow of
SPECIFICATIONS BY:	William D Bishop II		TITLE: Master Septic Contractor	
APPROVED BY:	Men from	TITLE: Environe	ental Specialist I	Columbia CHD
DATE ISSUED:	Sean P Hayens 08/07/2020		EXPIRATION DATE:	02/07/2022
DH 4016, 08/09 (Obs	oletes all previous edi	itions which may	not be used)	Page 1 of 3