



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

PERMIT NO. 25-0913
DATE PAID: 12-1-25
FEE PAID: \$60.00
RECEIPT #: 2278976
228

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Rebecca Merrick EMAIL: beck172@hotmail.com
AGENT: _____ TELEPHONE: _____
MAILING ADDRESS: 168 SW Stonehenge Ln Lake

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: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 23-45-16-03099-103 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: .7 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [X] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 168 SW Stonehenge Ln. Lake City FL 32024

DIRECTIONS TO PROPERTY: S on Sisters Welcome, right on Stonehenge, house on left

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>Storage building</u>		<u>750</u>	
2				
3				
4				

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

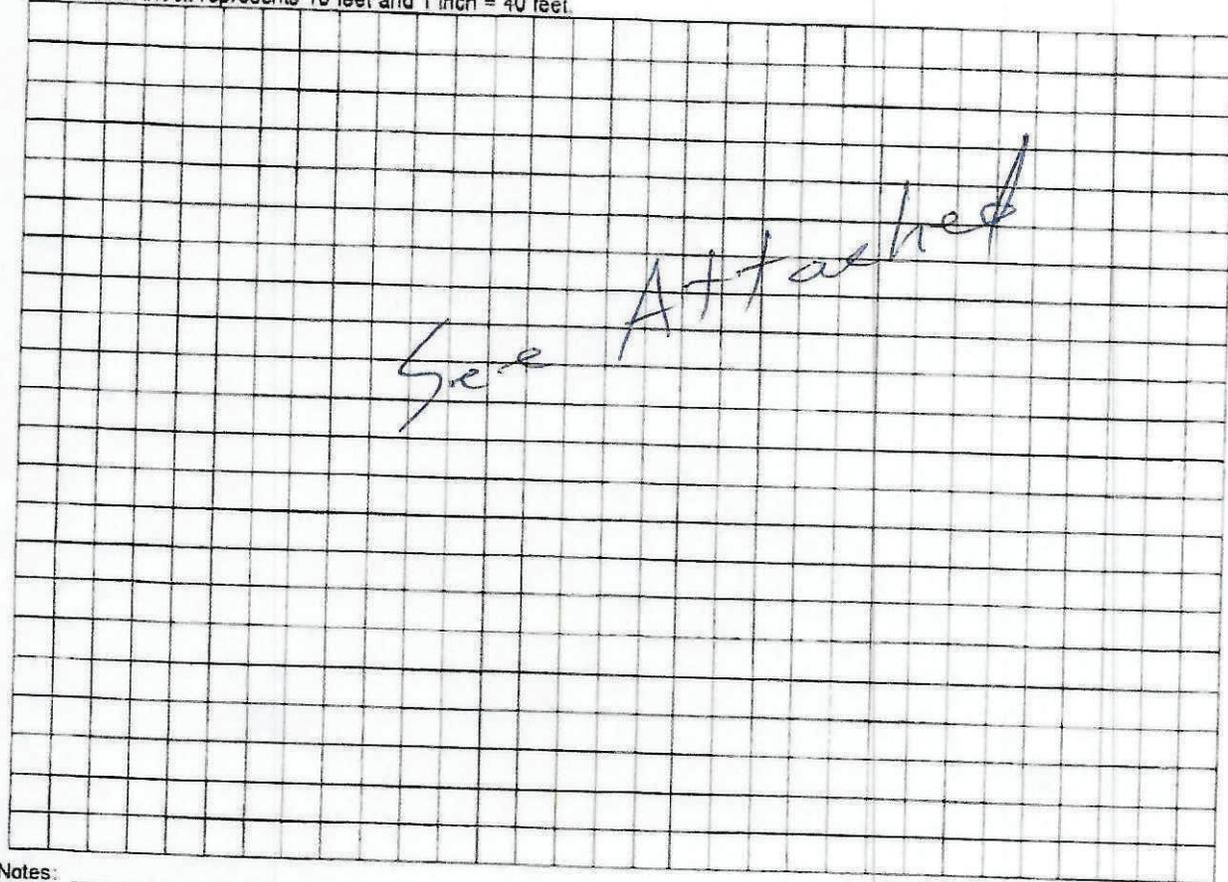
SIGNATURE: Rebecca Merrick DATE: 4/3/25

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

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



Notes: _____

Site Plan submitted by Rebecca Merrick

Plan Approved Not Approved _____ Date 2/25/26

By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

25-0913

