



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

PERMIT NO. 24-0678
DATE PAID: 9/15/04
FEE PAID: 310.00
RECEIPT #: 2141148

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

[x] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Leroy Murray EMAIL: jeffhardeehep@aol.com

AGENT: Jeff Hardee TELEPHONE: 352-949-0592

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: NA BLOCK: NA SUBDIVISION: NA PLATTED: _____

PROPERTY ID #: 15-35-16-02145-002 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 3.5 ACRES WATER SUPPLY: [x] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 3875 NW Lake Jeffrey Rd Lake City

DIRECTIONS TO PROPERTY: Hwy 90 West turn R NW Pascom NOMISAL
 then turn left NW Lake Jeffrey Rd lot on Right

BUILDING INFORMATION

[x] 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>2</u>	<u>749</u>	
2				
3				
4				

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

SIGNATURE: Jeff Hardee DATE: 8-28-24



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

PERMIT #: 12-SC-2995870
APPLICATION #: AP2144148
DATE PAID: 9/5/24
FEE PAID: 310.00
RECEIPT #: 2144148
DOCUMENT #: PR2154197

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: LEROY**24-0678 MURRAY

PROPERTY ADDRESS: 3875 NW LAKE JEFFREY Lake City, FL 32055

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 02145-002 [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 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 [250] 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 oak

I ELEVATION OF PROPOSED SYSTEM SITE [29.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [13.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [34.00] INCHES EXCAVATION REQUIRED: [16.00] INCHES

O The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated flow of 200 gpd.

T Dosing tank to be used if gravity flow cannot be achieved.

H

E

R

SPECIFICATIONS BY: Jeffrey W Hardee TITLE: PSE

APPROVED BY: Sean P Havens TITLE: Environmental Specialist I Columbia CHD

DATE ISSUED: 09/06/2024 EXPIRATION DATE: 03/06/2026

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

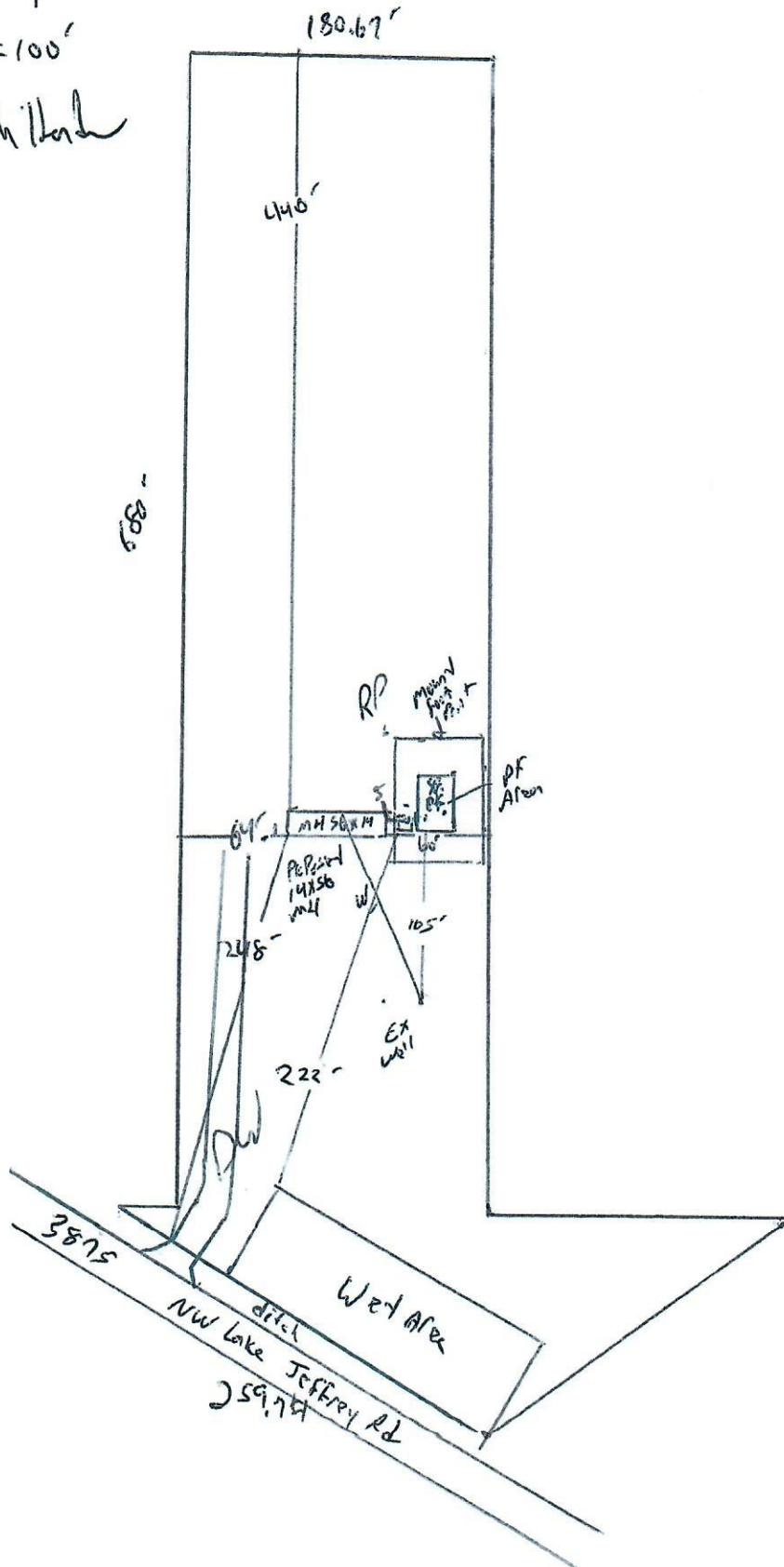
KR

Leroy Murray

24-2678

15-35-16-02145-002.

N
4
1"=100'
J.H. Hark



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

24-0678

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

Notes: _____

Site Plan submitted by: John Barker

Plan Approved ☒

Not Approved ☐

Date 9/5/24

By [Signature]

ES2

Columbia

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.

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