



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



E-MAILED

NFS 8/5/25

PERMIT #: **12-SC-3182562**
APPLICATION #: **AP2243265**
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____
DOCUMENT #: **PR2318631**

CONSTRUCTION PERMIT FOR: OSTDS Repair
APPLICANT: CHARLES**25-0624 THOMAS
PROPERTY ADDRESS: NW PILLSBURY Lake City, FL 32055
LOT: 9 BLOCK: F SUBDIVISION: Parnell Hills, Unit 2
PROPERTY ID #: 02058-042 [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 Existing septic tank CAPACITY
A [0] GALLONS / GPD _____ CAPACITY
N [0] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DOSES PER 24 HRS #Pumps []
D [300] SQUARE FEET Drainfield SYSTEM
R [0] SQUARE FEET _____ SYSTEM
A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND [] _____
I CONFIGURATION: [X] TRENCH [] BED [] _____
N
F LOCATION OF BENCHMARK: Oak tree north of site

I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [36.00] [INCHES] FT [] ABOVE [] BELOW BENCHMARK/REFERENCE POINT
L

D FILL REQUIRED: [6.00] INCHES EXCAVATION REQUIRED: [] INCHES

O The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.
T Contractor has recommended updating system to new code standards, system may be as deep as original at 42" BBM.
H Required drainfield area based on Rule 62-6.015(6)(c)2., F.A.C.
E Install a new drainfield to achieve Drainfield size requirement.
R

SPECIFICATIONS BY: Robert W Ford TITLE: M. Contractor

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

DATE ISSUED: 08/07/2025 EXPIRATION DATE: 11/16/2025

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

KK

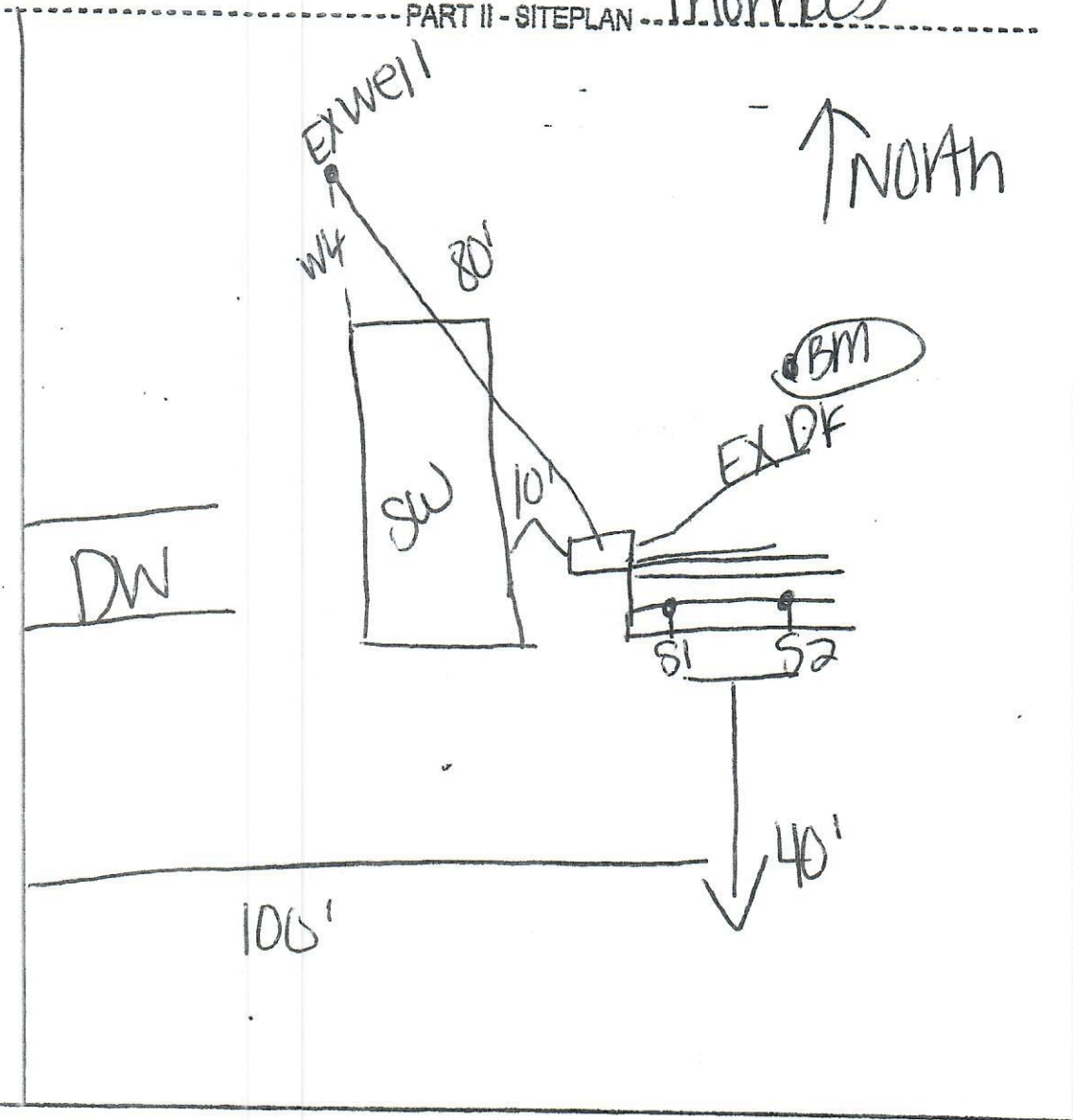
STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

25-06044

Thomas

PART II - SITEPLAN



Notes:

Site Plan submitted by: Robert Ford 909

7/14/15

Plan Approved

Not Approved

Date 8/18/25

By

[Signature]

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.



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

PERMIT NO. 25-0624
DATE PAID: 8/2/25
FEE PAID: 183188
RECEIPT #: 0043265

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: CHARLES THOMAS

EMAIL: NFLSEPTICTANK@COMCAST.NET

AGENT: ROBERT FORD III- NORTH FLORIDA SEPTIC TANK INC

TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE STATE ROAD 100, LAKE CITY FL 32025

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: 9 BLOCK: F SUBDIVISION: PARNELL HILLS UNIT 2 PLATTED: 1980

PROPERTY ID #: 10-3S-16-02058-042 ZONING: SF I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 1 ACRES WATER SUPPLY: [x] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: TBD NW PILLSBURY DR, LAKE CITY FL

DIRECTIONS TO PROPERTY: _____

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	MH	3	1128	ORG ATTACHED
2				
3				
4				

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

SIGNATURE: _____

DATE: 7/14/25