



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

PERMIT NO. 25-0382  
DATE PAID: 4/29/25  
FEE PAID: 40.00  
RECEIPT #: 222284

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Joseph Wheeler EMAIL: lizzie@eliteoutdoorbuildings.com

AGENT: Lizzie Brooks TELEPHONE: (352) 317-6101

MAILING ADDRESS: 21439 South US Highway 441, High Springs, FL 32643

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: 4 BLOCK: \_\_\_\_\_ SUBDIVISION: Dogwood Acres PLATTED: \_\_\_\_\_

PROPERTY ID #: 10-TS-17-09974-204 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 4.01 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

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

PROPERTY ADDRESS: 21439 South US Highway 441, High Springs, FL 32643

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>Accessory Structure</u>	<u>0</u>	<u>2,100</u>	<u>Rec'd 4/28/25</u> <u>Original</u>
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

[ ] Floor/Equipment Drain [ ] Other (Specify) \_\_\_\_\_  
SIGNATURE: [Signature] DATE: 4/11/25



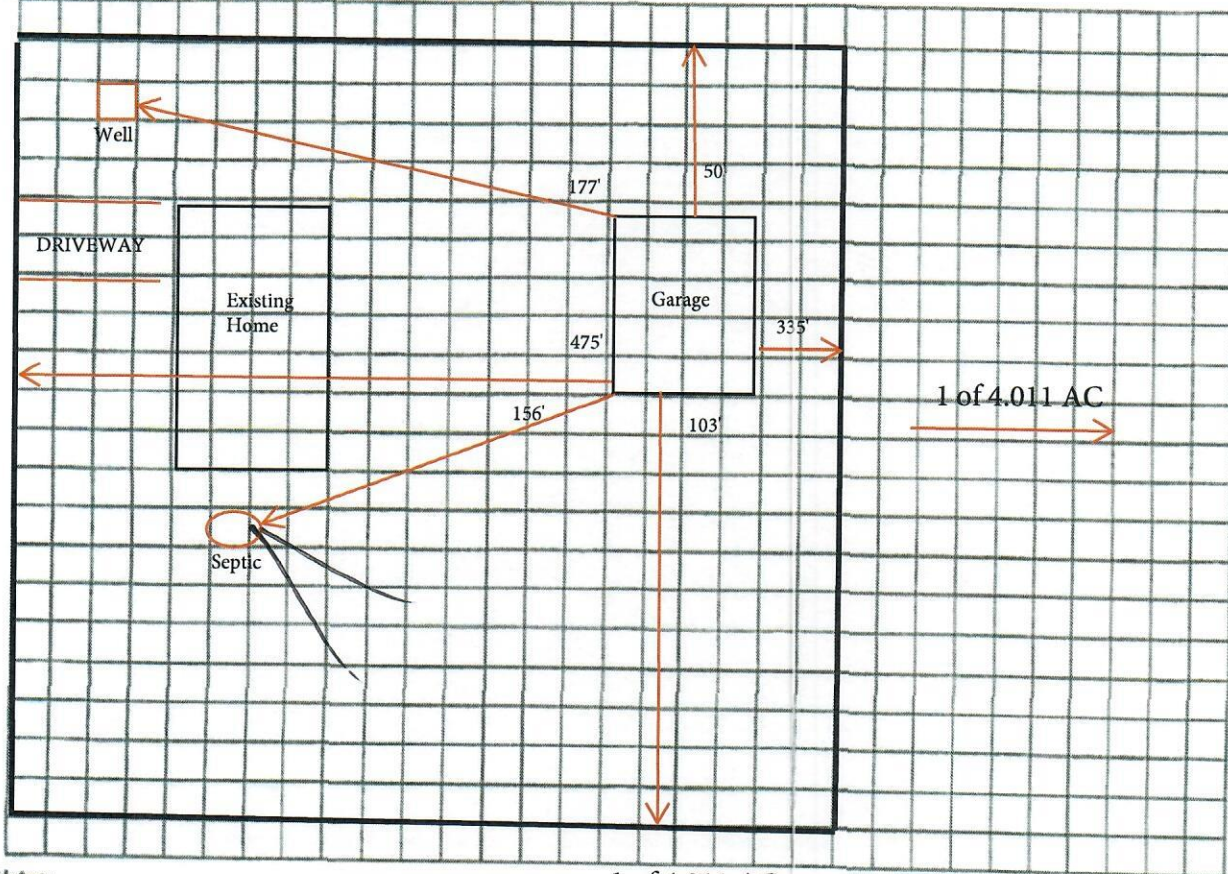
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PART II - SITEPLAN

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



Notes:

1 of 4.011 AC

Site Plan submitted by:

*Signi MC*

Plan Approved

Not Approved

By

Date *5/2/25*

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 09-21-2022 (Obsoletes previous editions which may not be used)

Incorporated: 62-6.004, F.A.C.