



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

PERMIT #: 12-SC-2112190
APPLICATION #: AP1527737
DATE PAID: 7/24/20
FEE PAID: 310.00
RECEIPT #: _____
DOCUMENT #: PR1379975

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: FREEDOM**20-0585 MH SALES, INC
PROPERTY ADDRESS: 238 NW BATTLE HILL Ln Lake City, FL 32055

Brecheen

LOT: 6 BLOCK: _____ SUBDIVISION: HIDDEN LAKE

PROPERTY ID #: 02365-206

[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 Septic Tank 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 [375] SQUARE FEET Drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM

A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []

I CONFIGURATION: [X] TRENCH [] BED []

N

F LOCATION OF BENCHMARK: Pine tree east of site.

I ELEVATION OF PROPOSED SYSTEM SITE [24.00] [INCHES] FT [] ABOVE / BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [46.00] [INCHES] FT [] ABOVE / BELOW BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [0.00] 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

H

E

R

SPECIFICATIONS BY: William D Bishop II TITLE: Master Septic Contractor

APPROVED BY: Dustin W Jones TITLE: Environmental Specialist II Columbia CHD

DATE ISSUED: 07/28/2020 EXPIRATION DATE: 01/28/2022

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC



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

PERMIT NO. 20-0585
DATE PAID: 7/24/20
FEE PAID: 310.00
RECEIPT #: 1527237

APPLICATION FOR:

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

APPLICANT: Freedom mobile Home Sales IncAGENT: North Florida Septic Tank IncTELEPHONE: 755-6372MAILING ADDRESS: 741 SE State Rd 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

LOT: 6 BLOCK: — SUBDIVISION: Hidden Lake PLATTED: —

PROPERTY ID #: 28-39-16-02365-206 ZONING: — I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 0.51 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ X DISTANCE TO SEWER: — FT

PROPERTY ADDRESS: 238^W Battle Hill Ln, Lake City, FL

DIRECTIONS TO PROPERTY: TR on US90, TR on Tuner Ave, TL on Battle Hill to 238 ON Left

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

| Unit No | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC |
|---------|-----------------------|-----------------|--------------------|--|
| 1 | <u>mhome</u> | <u>3</u> | <u>1795</u> | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

☐ Floor/Equipment Drains ☐ Other (Specify) —

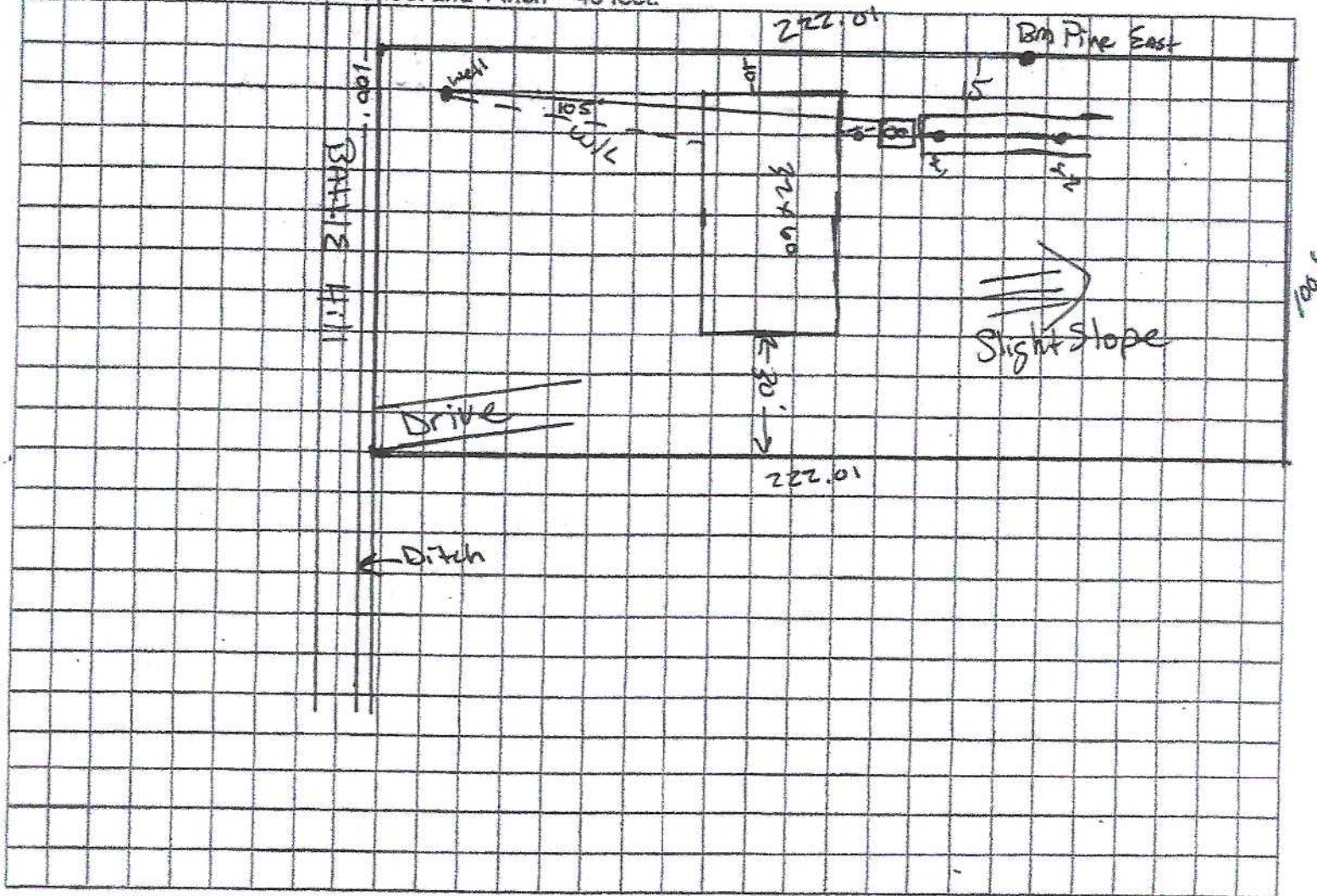
SIGNATURE: William D. Bishop IIDATE: 7-21-2020

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 20-0585

Freedom

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



Notes: _____

William D. Bishop II

Site Plan submitted by: Robert W. Ford III DATE 7-21-2020

Plan Approved X Not Approved _____

By [Signature] Columbia County Health Department

Date 7/28/20

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT