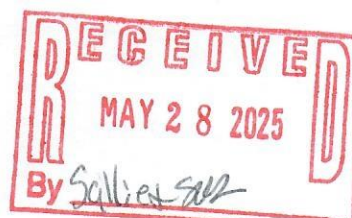




STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM (OSTDS)



PERMIT NO. 25-0464
DATE PAID: 5.28.25
FEE PAID: \$60.00
RECEIPT #: 2022257

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Riggs, Ashley EMAIL: kdkpermitting@gmail.com

AGENT: Kimberly Koon TELEPHONE: 386-688-2345

MAILING ADDRESS: P.O. Box 86 wellborn Fl 32094

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: 3 BLOCK: _____ SUBDIVISION: LILLIAN ACRES PLATTED: _____

PROPERTY ID #: 03-5S-17-09101-003 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 4.056 ACRES WATER SUPPLY: [x] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 211 sw count CT. Lake city fl

DIRECTIONS TO PROPERTY: Turn left onto US-441 S/N Marion Ave,
Turn left onto US-41 S/US-441 S, Turn right onto SW Jim Witt Rd,
Turn left onto SW Count Ct, Destination will be on the left

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	Existing to be removed	3	1698	
2	Replacement	3	2110	ORIGINAL ATTACHED
3				
4				

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

SIGNATURE: Kimberly Koon DATE: 5/27/25

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

Incorporated 62-6.004. FAC



25-0464

Date: 5/12/25' Scale: 1"=40'

Columbia
616125