



STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
ON-SITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM (OSTDS)

PERMIT NO. 22-0929  
DATE PAID: 11-15-22  
FEE PAID: 310.00  
RECEIPT #: 1911222

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Malik Jefferson

(Red Door Homes: 352-226-6858)

AGENT: Tommy Jones

TELEPHONE: 352-221-4473

MAILING ADDRESS: 1490 NE 130th St. Trenton, FL. 32693

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: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ PLATTED: \_\_\_\_\_

PROPERTY ID #: 23-45-17-08713-000 (32264) ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 13.33 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 4344 SE CR-245 Lake City 32025

DIRECTIONS TO PROPERTY: Take 100 E, TR on CR-245, property will be on R

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>SFR</u>	<u>3</u>	<u>1176</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: [Signature]

DATE: 11-9-22

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





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

Permit Application Number 22-0929

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

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

Jefferson

Attached

See

Notes: \_\_\_\_\_

Site Plan submitted by: Jefferson Heck

Plan Approved X Signature Not Approved \_\_\_\_\_

By [Signature] Date 21-2061 11-9-22

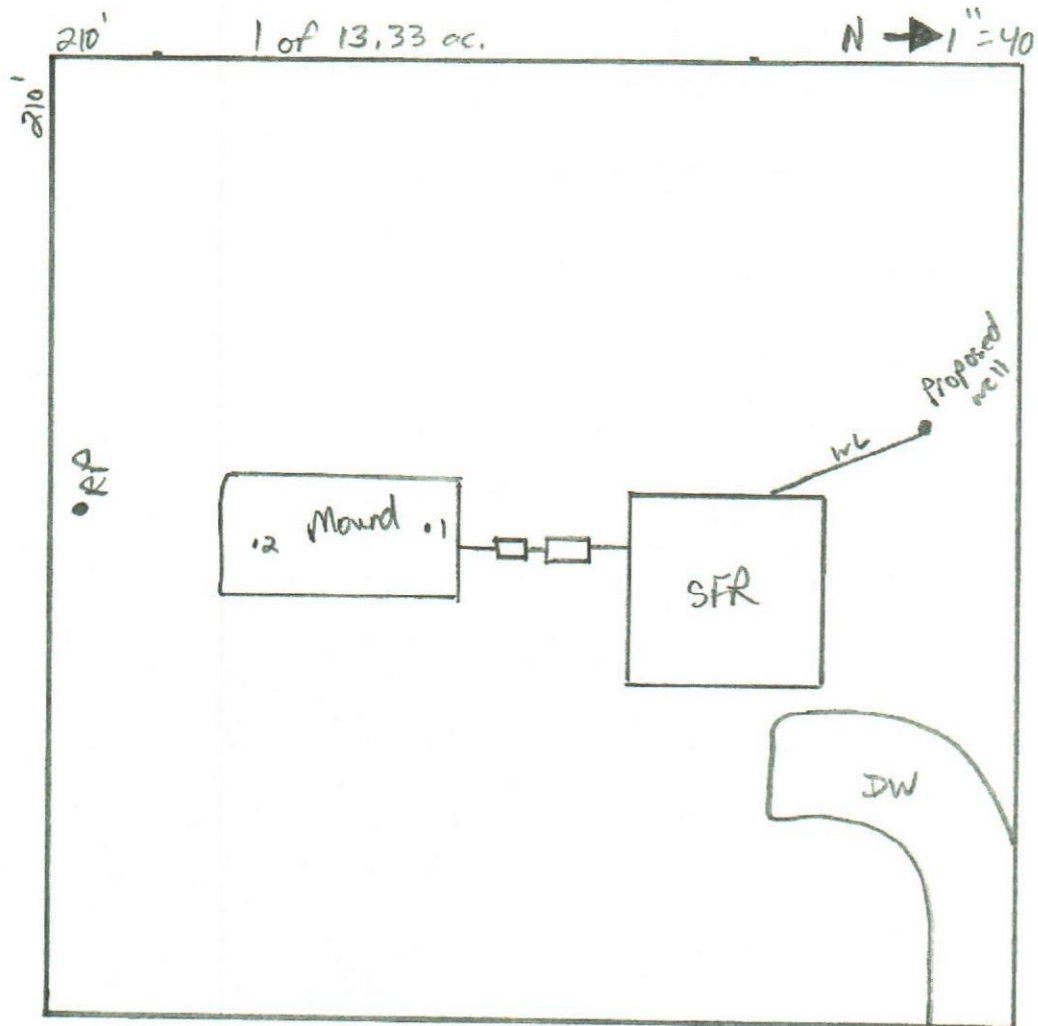
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

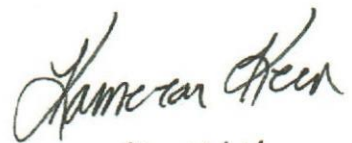
Malik Jefferson  
4344 SE CR-245  
Lake City

Red Door Homes  
352-226-6858

22-0929



  
11-9-22

  
21-2064  
11-9-22





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

E-MAILED  
*T. Jones*

PERMIT #: **12-SC-2604588**  
APPLICATION #: **AP1911222**  
DATE PAID: 11/15/22  
FEE PAID: 310.00  
RECEIPT #:  
DOCUMENT #: **PR1877590**

CONSTRUCTION PERMIT FOR: OSTDS New  
APPLICANT: MALIK\*\*22-0929 JEFFERSON  
PROPERTY ADDRESS: 4344 SE CR 245 Lake City, FL 32025  
LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_  
PROPERTY ID #: 08713-000 [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 \_\_\_\_\_ Drianfield SYSTEM  
R [ ] SQUARE FEET \_\_\_\_\_ N/A SYSTEM  
A TYPE SYSTEM: [ ] STANDARD [ ] FILLED [x] MOUND [ ]  
I CONFIGURATION: [x] TRENCH [ ] BED [ ]

F LOCATION OF BENCHMARK: Nail w/ pink ribbon in pine near site.

I ELEVATION OF PROPOSED SYSTEM SITE [ 19.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [ 1.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [ 36.00 ] INCHES EXCAVATION REQUIRED: [ 24.00 ] 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 \*\*Remove all Spodic material, excavation material is to NOT be used in or on system including slopes.

SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP

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

DATE ISSUED: 11/16/2022 EXPIRATION DATE: 05/16/2024

DM 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC