

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

Vision : To be the **Healthiest State** in the Nation

May 06, 2024

DOROTHY**24-0377 GALLO
SETH NETTLES
Lake City, FL 32024

RE: Contingency Letter
Application Document No: AP2068655
Centrax Permit Number: 12-SC-2897335
OSTDS Number:
201 SE SETH NETTLES Dr
Lake City, FL 32024

Lot: Block: Subdivision:

Dear Applicant:

This will acknowledge receipt of an application dated 05/03/2024 for a permit to use an existing onsite sewage treatment and disposal system located on the above referenced property.

From a review of your completed application, it has been determined that your existing system appears to meet the minimum standards of F.A.C. 62-6 for the proposed use. It is approved for use with the plans submitted to this office. If this system should fail, causing an unsanitary condition to exist, steps must be taken to bring the system into compliance immediately. Department approval of the 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 approval requires the applicant to modify the permit application. Such modification may result in this approval being made null and void. Issuance of this approval does not exempt the applicant from compliance with other Federal, State, or Local Permitting required for development of this property.

If you have any questions on this matter, please call our office at (386) 758-1058.

Sincerely,

Sean Havens, Environmental Specialist I

Enclosures
cc:



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

PERMIT NO. 24-0377
DATE PAID: 5/3/2024
FEE PAID: 100.00
RECEIPT #: AP2068655

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Dorothy Gail EMAIL: elementalstorm44@gmail.com

AGENT: _____ TELEPHONE: (386) 288-0032

MAILING ADDRESS: 201 se Seth Nettles Dr. 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: 20 BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 35-45-17-09030-072 ZONING: _____ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 1.14 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS: 201 se Seth Nettles Dr. Lake City FL 32025

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>Shed</u>	<u>0</u>	<u>1500</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Dorothy Gail DATE: 5/3/24

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

Incorporated 62-6.004, FAC

Page 1 of 4

1A shown

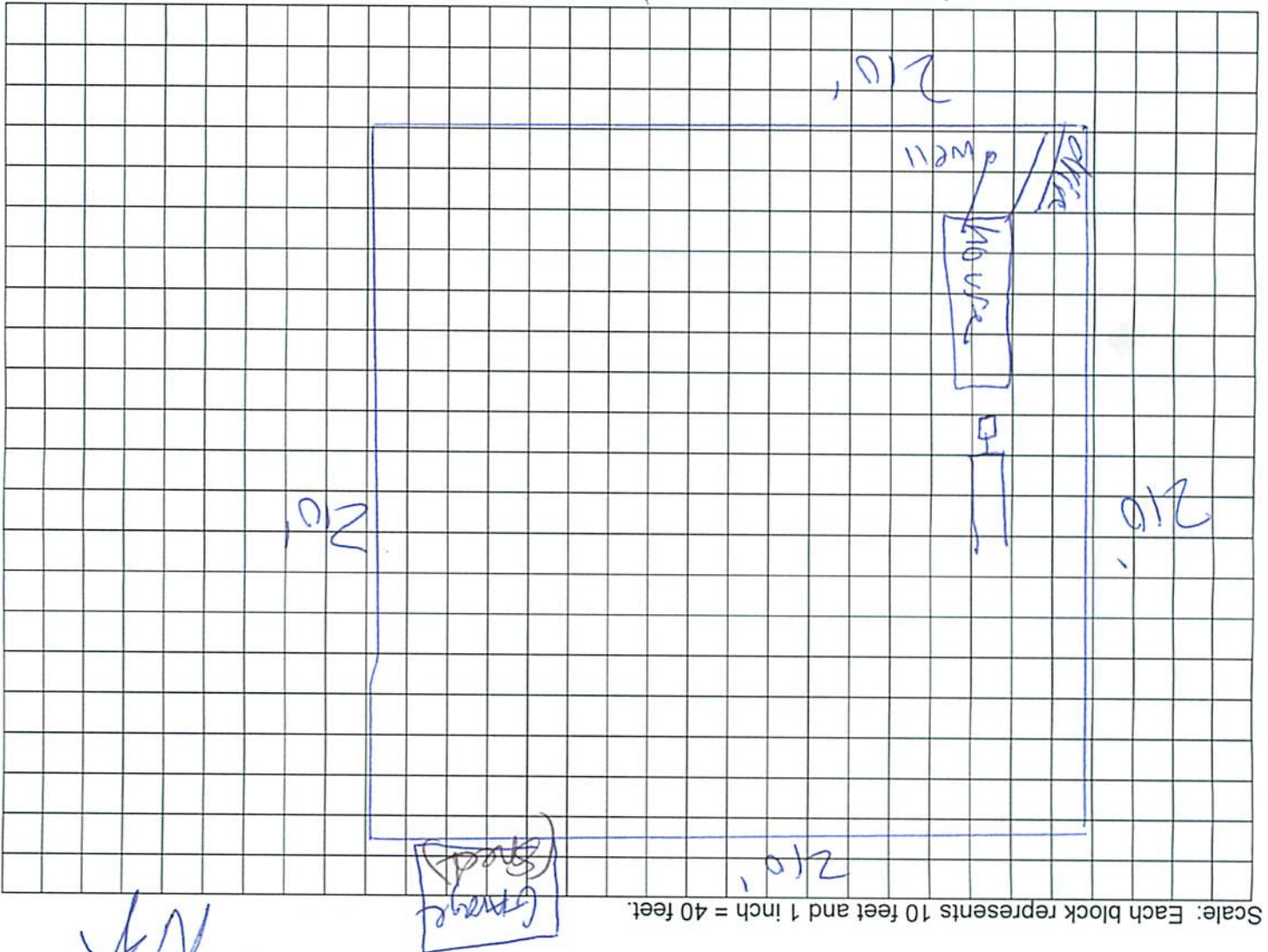
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

24-0377

PART II - SITEPLAN

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



Notes: new shed will not have electric, plumbing or septic

Site Plan submitted by: _____
Plan Approved _____
By: Dorothy Hasso
Not Approved _____
Date 5/3/24
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT