



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

PERMIT NO. 23-0232
DATE PAID: 3127123
FEE PAID: 60.00
RECEIPT #: AP1955478

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Patricia Bryant EMAIL: Rukale@windstream.net

AGENT: _____ TELEPHONE: _____

MAILING ADDRESS: 6555 SW Old Wire Rd.

Ft. White, Fl. 32038

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 #: 11-6S-16-03816-222 ZONING: _____ I/M OR EQUIVALENT: ☐ Y / ☐ N

PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y / ☐ N DISTANCE TO SEWER: 33 FT

PROPERTY ADDRESS: 6555 SW Old Wire Rd. Ft. White, Fl. 32038

DIRECTIONS TO PROPERTY: Hwy 47 to Walter Rd. turn left come to top of hill and go straight across to Herlong Rd. (4 way stop) Go across to the 5 House on left side.

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit Type of No. of Building Commercial/Institutional System Design
No. Establishment Bedrooms Area Sqft Table I, Chapter 62-6, FAC

1 Single Family home 32 1600⁹⁴⁰ new house

2 Existing house 2 1152 proposed existing house

3 _____ 4 _____

4 _____ 4 _____

☐ Floor/Equipment Drains ☒ Other (Specify) total

SIGNATURE: Pat Bryant DATE: 27 MAR 2023

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

Incorporated 62-6.004, FAC

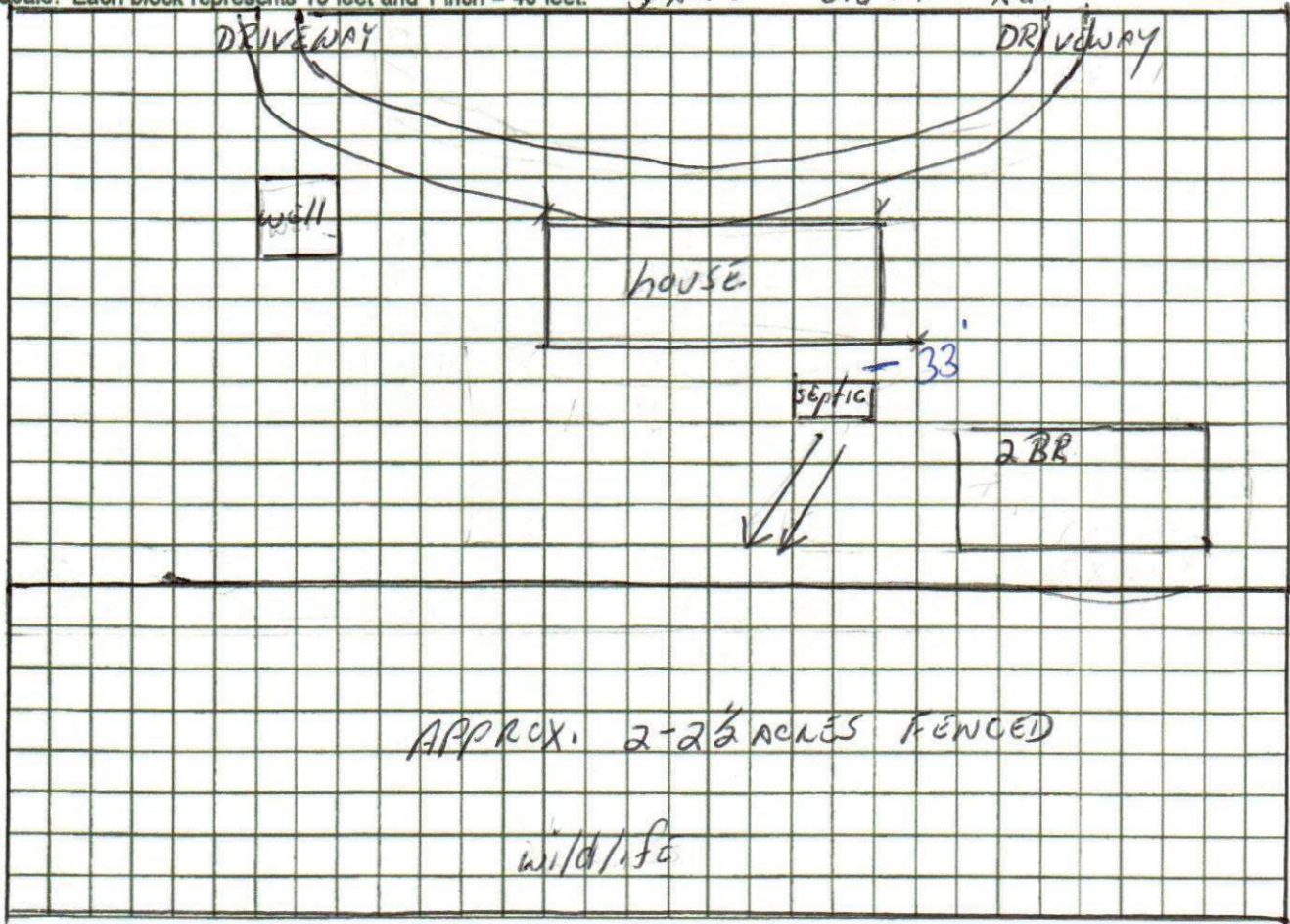
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----- PART II - SITEPLAN -----

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

5 ACRES old wine Rd.



Notes: _____

Site Plan submitted by: [Signature]

Plan Approved [Signature]

Not Approved _____

Date 27 MAR 2023

By [Signature] ES2 Columbia County Health Department

3/29/23

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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

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

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