

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

PERMIT #: 12-SC-2503203

APPLICATION #: AP1831326

DATE PAID: 4/28/22

FEE PAID: 316.00

RECEIPT #:\_\_\_\_

DOCUMENT #: PR1762567

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: UNDER**22-0380 ALL, LLC	
PROPERTY ADDRESS: 297 SW KIMBERLY Lake City, FL 32024	
SUBDIVISION: Kimberly Oaks	SECTION OF
PROPERTY ID #: 03026-109 [SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	EL NUMBER]
And the property of the state o	NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS	
[ 1,050 ] GALLONS / GPD New Multi-Chambered Septic CAPACITY	
A [ ] GALLONS / GPD N/A CAPACITY	
[ ] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALL	ONS]
[ ] GALLONS DOSING TANK CAPACITY [ ]GALLONS @[ ]DOSES PER 24 HRS	#Pumps [ ]
Drainfield SYSTEM	
R [ ] SQUARE FEETN/A SYSTEM	
TYPE SYSTEM: [*] STANDARD [ ] FILLED [ ] MOUND [ ]	
CONFIGURATION: [X] TRENCH [ ] BED [ ]	
F LOCATION OF BENCHMARK: Nail in tree west of septic system	
ELEVATION OF PROPOSED SYSTEM SITE [ 24.00 ] [ INCHES / FT ] [ ABOVE / BELOW ] BENCHMARK/RE	FERENCE POINT
BOTTOM OF DRAINFIELD TO BE [ 42.00 ] [ INCHES   FT ] [ ABOVE   BELOW ] BENCHMARK/RE	
	FERENCE POINT
FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [ ] INCHES  The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated	d flow of
400 gpd.	
SPECIFICATIONS BY: Ronald C Ford TITLE: M. Contractor	
APPROVED BY: TITLE: Environmental Specialist I	Columbia CHD
Sean & Havens	
DATE ISSUED: 04/29/2022 EXPIRATION DATE:	10/29/2023

v 1.1.4

SE1679886

## STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT



Permit Application Number 33-0380

PART II - SITEPLAN Scale: one inch = 60 feet SW Kimberly Lane. VACANT

Notes:		
* PARCEL ID #	#: 16.45·16·03026·109	
* ADDRESS:	297 SW Kimberly	Lane
	Lake City, Florida	32024
Site Plan submitted by:	Pa Sonald Ford	
Plan Approved	Not Approved	Date 4/29/22
Ву	= FSZ (dumba	County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

SSOCOF #: done by Ford's Septic on : _	2022
STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT	PERMIT NO. DATE PAID: FEE PAID: RECEIPT #:
APPLICATION FOR:  [X] New System [ ] Existing System [ ] Holding Tank [ ] Repair [ ] Abandonment [ ] Temporary	k [ ] Innovative
APPLICANT: UNDER All, LLC	
AGENT: Ronald Ford - Ford's Septic	ELEPHONE: 386-755-6288
MAILING ADDRESS: 116 NW Lawtey Way Lake City, Florida 3	32055
PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDS  PROPERTY INFORMATION  LOT:	
PROPERTY ID #: 16.45.16.03026.109 zoning: 1/M	
property size: 1.03 acres water supply: [X] private public [	
IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y /N] DIST	
PROPERTY ADDRESS: 297 SW Kimberly Lane L	ake city, the 32024
DIRECTIONS TO PROPERTY:	
247 South. (B) on Upchurch A	wenue.
(Don Kimberly Lane. Home # 297	at end.
BUILDING INFORMATION [X] RESIDENTIAL [] COMMER	CIAL
Unit Type of No. of Building Commercial/Ins No Establishment Bedrooms Area Sqft Table 1, Chapt	titutional System Design er 64E-6, FAC
	SQUARE FEET )
3	

DATE: 4.27.22 GOVALD FORD DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

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