

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

PERMIT NO. 2 - 0000
DATE PAID: - 11-21
FEE PAID: RECEIPT #: 12-13-9

APPLICATION FOR [X] New Syste [ ] Repair	m [] E	xisting Syst	tem [	1	Holding Tank Temporary	]	]	Innovative
APPLICANT: Ky	e Dicks							
AGENT: ROCKY FO	RD, A & B CON	STRUCTION			TE.	LEPHO	ONE:	386-497-2311
MAILING ADDRESS	3: 546 SW Dort	ch Street,	FT. WHITE,	FL,	32038			
TO BE COMPLETED BY A PERSON LIC APPLICANT'S RES PLATTED (MM/DD/	ENSED PURSUAN SPONSIBILITY T (YY) IF REQUES	T TO 489.10 O PROVIDE D TING CONSID	5(3)(m) OR OCUMENTATIO ERATION OF	489 N O	.552, FLORIDA F THE DATE THE	STATE LOT	TUTE: T WA: R PR	S CREATED OR OVISIONS.
PROPERTY INFORM	ATION							
LOT: NA B	LOCK: NA	SUB: NA					_ P	PLATTED:
								ALENT: [ Y N]
								GPD [ ]>2000GPD
IS SEWER AVAIL	ABLE AS PER 38	1.0065, FS?	[ Y / M]		DISTA	NCE	TO S	SEWER: NA FT
PROPERTY ADDRES	SS: SW	CR 240 Lake	e City FL					
DIRECTIONS TO I	PROPERTY: 441	South Righ	nt on CR 2	40 1	to lot on Rig	ght		
BUILDING INFORM	MATION	[X] RESI	DENTIAL		[ ] COMMERC:	IAL		
Unit Type of No Establish	nment	No. of Bedrooms			mmercial/Instable 1, Chapter			l System Design FAC
1 SF Resi 2	dential	3	3281	_				
3				_				
[ ] Floor/Equ								./7/2021
	11.1	The state of				DAL		/ // 2021

## STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

		Permit Application Number_	3/-00x
K. Dicks	PART II - SIT	EPLAN	
Scale: 1 inch = 40 feet.	CR 240		
	MING	·88	
910,		3 210'	
		1866 196 187	
Notes:	210' C OF 20.01		
Site Plan submitted by:  Plan Approved  **By  **	Not Approved	MAST  Columbre Col	ER CONTRACTOR Date 11712021 unty Health Department
ALL CH	ANGES MUST BE APPROVED BY T	THE COUNTY HEALTH DEPAR	1/15/2/ TMENT



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

PERMIT #: 12-SC-2220090

APPLICATION #: AP1612139

FEE PAID: 310 50

RECEIPT #:\_\_\_\_

DOCUMENT #: PR1499830

CONSTRUCTION PERMIT	FOR: OSTDS New			
APPLICANT: KYLE**21				
PROPERTY ADDRESS:	CR 240 Lake City, FL 32024			
LOT:	BLOCK: SUI	BDIVISION:		
PROPERTY ID #: 091	85-001		[SECTION, TOWNSHIP, RANGE, PARC [OR TAX ID NUMBER]	EL NUMBER]
SATISFACTORY PERFORM WHICH SERVED AS A PERMIT APPLICATION. ISSUANCE OF THIS	D CHAPTER 64E-6, F.A.C MANCE FOR ANY SPECIFICA A BASIS FOR ISSUANCE OF SUCH MODIFICATIONS 1	C. DEPARTN C PERIOD ( OF THIS PE MAY RESULT PT THE APP	ENT APPROVAL OF SYSTEM DOE  OF TIME. ANY CHANGE IN  RMIT, REQUIRE THE APPLICANT  IN THIS PERMIT BEING MADE  LICANT FROM COMPLIANCE WITH	MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SP	ECIFICATIONS			
A [ ] GALLONS N [ ] GALLONS K [ ] GALLONS D [ 500 ] SQUARE R [ ] SQUARE A TYPE SYSTEM: I CONFIGURATION:	GREASE INTERCEPTOR CAPACE DOSING TANK CAPACITY  FEET Drainfield FEET N/A	A ITY [MAXIMUI	CAPACITY  M CAPACITY SINGLE TANK:1250 GALI LONS @[ ]DOSES PER 24 HRS	
N F LOCATION OF BENCHM	ARK: Nail in fence post N. site	э.		
E BOTTOM OF DRAINFIE L D FILL REQUIRED: The system is sized fo 400 gpd.	LD TO BE [ 27.	.00 ] [ INCHES CAVATION REQU	FT ] [ ABOVE / BELOW BENCHMARK/RI FT ] [ ABOVE / BELOW BENCHMARK/RI IRED: [ 0.00 ] INCHES sons (2 per bedroom), for a total estimate	EFERENCE POINT
H				
R				
SPECIFICATIONS BY:	WILLIAM D BISHOP	Т	ITLE: SA0890009; SM0081587	
APPROVED BY		LE: Environme	ntal Specialist II	Columbia CHD
DATE ISSUED:	Dustin W Jones 01/21/2021	27210.11110	EXPIRATION DATE:	07/21/2022
	letes all previous edition	ns which may	not be used)	Page 1 of 3