

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

March 21, 2022

WILLIAM**22-0232 LIGATO
HILL CREEK
Lake City, FL 32025

RE: Contingency Letter
Application Document No: AP1811640
Centrax Permit Number: 12-SC-2479152
OSTDS Number:
288 SW HILL CREEK
Lake City, FL 32025

Lot:2

Block:

Subdivision: Hills at Rose Creek PH2

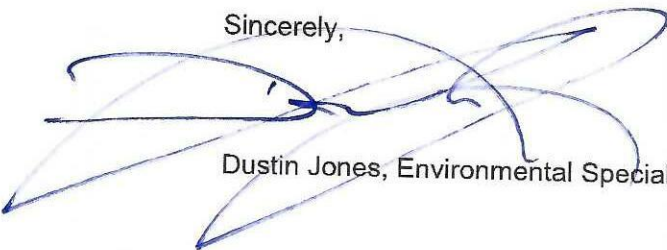
Dear Applicant:


This will acknowledge receipt of an application dated 03/18/2022 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. 64E-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) 785-1058.

Sincerely,


Dustin Jones, Environmental Specialist II


Enclosures
cc:

WILLIAM**22-0232 LIGATO

Page two

March 21, 2022

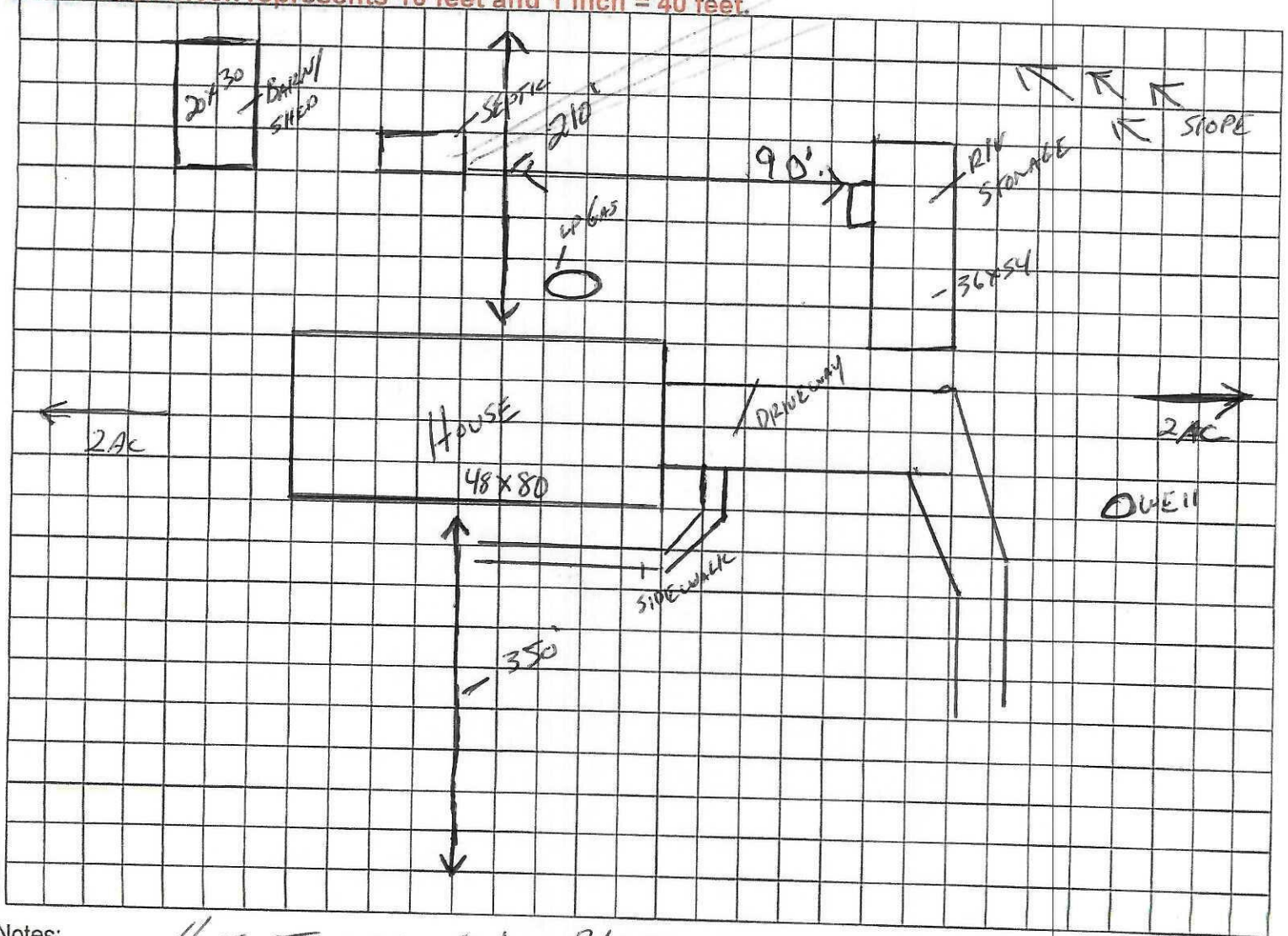
~~Matthew~~
matthew@electric.permits@gmail.com
matt hews - called & emailed them this
permit on 12-17-24.
@ 11:16 AM

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 22-0232

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

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



Notes: HOUSE TO WELL 150' R/W STORAGE - SEPTIC 175' R/W STORAGE TO LP TANK 150'
NO SEWAGE WILL BE NEEDED, NO WATER, *ONLY ELECTRIC

Site Plan submitted by: STEVEN NANCE Agent TITLE 2/28
Plan Approved X Not Approved Columbia CHD DATE: 3/22/22
BY [Signature] Date 3/22/22
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number: 000000

PART II: SITE PLAN

General Notes: 1. All dimensions are in feet and inches. 2. All dimensions are to the centerline of the structure.



Notes:

The Plan submitted by _____
Plan Approved _____
No. Approved _____
Date _____
County Health Department _____

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 22-0232
DATE PAID: 3/1/2022
FEE PAID: 600.00
RECEIPT #: 1811648

APPLICATION FOR:

[] New System [☒] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Steven Narko William Ligato

AGENT: Steven T Narko

TELEPHONE: 852-317-9607

MAILING ADDRESS: Steven Narko @ Motion Buildings, Inc

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

LOT: 2 BLOCK: 32-45-17 SUBDIVISION: Hills & P-2 Post Creek PLATTED: 09/16/02

PROPERTY ID #: 1249-536 ZONING: R I/M OR EQUIVALENT: [☒] [☐]

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

IS SEWER AVAILABLE AS PER 381.0065, FS? [☒] [☐] N] DISTANCE TO SEWER: 300 FT

PROPERTY ADDRESS: 288 SW Hill Creek DR Lake City FL 32025

DIRECTIONS TO PROPERTY: SAME ADDRESS AS ABOVE (GPS) EXIT 414

BUILDING INFORMATION

[☒] RESIDENTIAL [] COMMERCIAL

| Unit No | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC |
|---------|-----------------------|-----------------|--------------------|--|
|---------|-----------------------|-----------------|--------------------|--|

1

2

3

4

ORIGINAL ATTACHED

[] Floor/Equipment Drains [☒] Other (Specify) No water

SIGNATURE: [Signature]

DATE: 3/1/2022



STATE OF FLORIDA
DEPARTMENT OF HEALTH
OFFICE OF SANITATION AND ENVIRONMENTAL CONTROL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 36-0385
DATE SAID:
FOR SAID:
RECEIVED AT

APPLICATION FOR:
[] New System
[] Existing System
[] Abandonment

[] Existing Tank
[] Temporary

APPLICANT:

AGENT:

PLANNING NUMBER:

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 405.105(2) (b) OR 405.105(2) (c) IN THE STATE OF FLORIDA. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE INFORMATION OF THE DATE THE LOT WAS CREATED OR SPLITTED (SPLIT/YES) IT REQUESTING CONSTRUCTION OF SEWERAGE OR WASTEWATER TREATMENT SYSTEM.

PROPERTY INFORMATION

LOT: 5

SECTION: 5

36-0385-17 0911-0000

WARRANTY IN:

CONVINCING

PLANNING

PROPERTY SIZE: 2 ACRES WATER SUPPLY: [] PRIVATE PUBLIC []

12000000

IS SEWER AVAILABLE IN THE LOT? YES [] NO []

DISTANCE TO SEWER:

PROPERTY ADDRESS:

DIRECTION TO PROPERTY:

BUILDING INFORMATION

Unit Type of
No. of

Building Construction/Industrial System Design
Bedrooms: 4
Baths: 1
Total Sq. Ft.: 1,000

1

2

3

4

[] Water/Equipment Details [] Other (Specify):

SIGNATURE:

22-0232

FLOORPLAN

LENGTH 54'

WIDTH 36'

BEDROOMS 0 & SQ FOOTAGE OF LIVING AREA - or Bldg SQ FOOTAGE 1944

PLEASE NOTE THAT A FLOORPLAN OF YOUR HOME OR STRUCTURE IS REQUIRED. WE DO NOT REQUIRE ACTUAL BLUEPRINTS. IF YOUR DEALER HAS PROVIDED A FLOORPLAN, WE PREFER IT, IF NOT, PLEASE SKETCH ONE SHOWING OUTSIDE DIMENSIONS AND INSIDE ROOM LAYOUT.

SHEDS, STORAGE, OR OTHER BLDGS MAY BE NOTED AS OPEN FLOORPLAN with no bedrooms or bathrooms

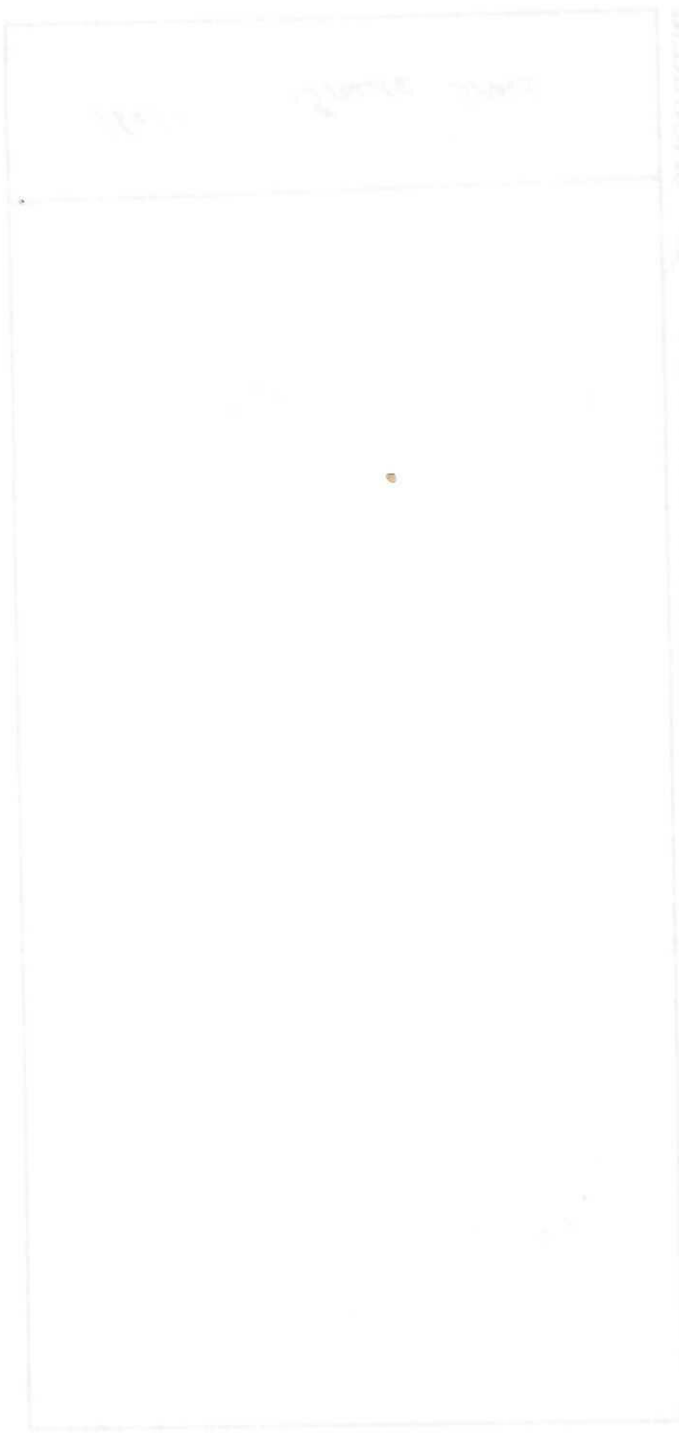
DATE: 2/18/2022 SUBMITTED BY: STEVEN NAWIS

DATE 05/01/2011 SUBMITTED BY: [Signature]

SKETCHES, STORAGE, OR OTHER DETAILS MAY BE NOTED AS OPEN FLOORPLAN WITH NO FURNITURE DIMENSIONS

IF NOT PLEASE SKETCH ONE SHOWING OUTSIDE DIMENSIONS AND INSIDE ROOM LAYOUT.
REQUIRE ACTUAL MEASUREMENTS. IF YOUR DEALER HAS PROVIDED A FLOORPLAN, WE PREFER IT.
PLEASE NOTE THAT A FLOORPLAN OF YOUR HOME OR STRUCTURE IS REQUIRED. WE DO NOT

BEDROOMS 2 SQ FOOTAGE OF LIVING AREA 1200 SQ FOOTAGE 1200



WIDTH 1200

FLOORPLAN

05/01/2011

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**Ron DeSantis**

Governor

Scott A. Rivkees, MD
State Surgeon General**Vision:** To be the Healthiest State in the Nation

TO: COLUMBIA COUNTY HEALTH DEPARTMENT
Environmental Health
Phone 386-758-1058 Fax 386-758-2187

FROM: STEVEN NADGE (AGENT) William Ligato
PERMIT: # 22-0232

As owner or authorized agent for the property described in the above referenced permit, I certify that I am fully aware of the following:

1. I am aware of the zoning requirements for this property, and I have determined from the County Planning & Zoning office that I can develop the property as described in my septic tank permit application.
2. I understand that it is my responsibility to determine if my property and proposed development lies within a flood prone area. (The County Planning & Zoning office can provide this information).

SIGNATURE: [Signature] DATE: 2/28/2022
____ OWNER AUTHORIZED AGENT [Signature]





When the health department is closed

TO: COLUMBIA COUNTY HEALTH DEPARTMENT
Environmental Health
Phone 386-788-4056 Fax 386-788-4187

FROM: William Light
PERMIT: 92-0232

As owner or authorized agent for the property described in the above referenced permit, I certify that I am fully aware of the following:
1. I am aware of the zoning requirements for the property, and I have determined from the County Planning & Zoning Office that I am complying with the property as described in my application for permit application.
2. I understand that it is my responsibility to determine if my property and proposed development are within a flood zone area. (The County Planning & Zoning Office can provide this information.)

SIGNATURE _____ DATE _____
OWNER _____ AUTHORIZED AGENT _____



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION INSPECTION AND FINAL APPROVAL

22-0232

APPLICATION #: AP1305038
PERMIT #: 12-SC-1785973
DOCUMENT #: F11168534
DATE PAID: 08/24/2017
FEE PAID: 310.00
RECEIPT #: 12-PID-3339107

APPLICANT: Garry**17-0563 Ward
AGENT: Felton Howard (Howard & Sons Septic Tank Inc.)
PROPERTY ADDRESS: SW Hill Creek Dr Lake City, FL 32024

LOT: 2 BLOCK:
SUBDIVISION: Hills at Rose Creek PH2 ID#: 09116-102

CHECKED [X] ITEMS ARE NOT IN COMPLIANCE WITH STATUTE OR RULE AND MUST BE CORRECTED.

| | | | |
|---|--|---|--------------------------------------|
| TANK INSTALLATION | | SETBACKS | |
| [] [01] TANK SIZE [1] <u>900.00</u> [2] _____ | [] [27] SURFACE WATER <u>NA</u> FT | [] [02] TANK MATERIAL <u>Concrete</u> | [] [28] DITCHES <u>NA</u> FT |
| [] [03] OUTLET DEVICE <u>tee-filter</u> | [] [29] PRIVATE WELLS <u>100</u> FT | [] [04] MULTI-CHAMBERED [] <u>Y</u> [] <u>N</u> | [] [30] PUBLIC WELLS <u>NA</u> FT |
| [] [05] OUTLET FILTER <u>Tuf-Tite EF-4</u> | [] [31] IRRIGATION WELLS <u>NA</u> FT | [] [06] LEGEND 1. <u>34-107-09DC3</u> 2. _____ | [] [32] POTABLE WATER <u>70</u> FT |
| [] [07] WATERTIGHT | [] [33] BUILDING FOUNDATIONS <u>35</u> FT | [] [08] LEVEL | [] [34] PROPERTY LINES <u>50</u> FT |
| [] [09] DEPTH TO LID | [] [35] OTHER <u>NA</u> FT | FILLED / MOUND SYSTEM | |
| DRAINFIELD INSTALLATION | | [] [36] DRAINFIELD COVER | |
| [] [10] AREA [1] <u>380</u> [2] _____ SQFT | [] [37] SHOULDERS <u>NA</u> | [] [38] SLOPES | |
| [] [11] DISTRIBUTION <u>BOX</u> <u>HEADER</u> <u>X</u> | [] [39] STABILIZATION | ADDITIONAL INFORMATION | |
| [] [12] NUMBER OF DRAINLINES 1. <u>2.00</u> 2. _____ | [] [40] UNOBSTRUCTED AREA | [] [41] STORMWATER RUNOFF | |
| [] [13] DRAINLINE SEPARATION | [] [42] ALARMS <u>NA</u> | [] [43] MAINTENANCE AGREEMENT | |
| [] [14] DRAINLINE SLOPE | [] [44] BUILDING AREA | [] [45] LOCATION CONFORMS WITH SITE PLAN | |
| [] [15] DEPTH OF COVER | [] [46] FINAL SITE GRADING | [] [47] CONTRACTOR <u>Allen Duke (First Coast)</u> | |
| [] [16] ELEVATION [] <u>ABOVE</u> [] <u>BELOW</u> <u>1BM 41.00</u> | [] [48] OTHER <u>RING EZ1203H (Bed or Trench 3, 12"</u> | ABANDONMENT | |
| [] [17] SYSTEM LOCATION | [] [49] TANK PUMPED <u>NA</u> | [] [50] TANK CRUSHED & FILLED | |
| [] [18] DOSING PUMPS <u>NA</u> | | | |
| [] [19] AGGREGATE SIZE | | | |
| [] [20] AGGREGATE EXCESSIVE FINES | | | |
| [] [21] AGGREGATE DEPTH | | | |
| FILL / EXCAVATION MATERIAL | | | |
| [] [22] FILL AMOUNT | | | |
| [] [23] FILL TEXTURE <u>NA</u> | | | |
| [] [24] EXCAVATION DEPTH | | | |
| [] [25] AREA REPLACED | | | |
| [] [26] REPLACEMENT MATERIAL | | | |

Comments: Comments are on page 2.

CONSTRUCTION [☒ APPROVED] / DISAPPROVED [] : Columbia CHD
Environmental Specialist: Jeremy X Gifford (BOH: Columbia, Union and
FINAL SYSTEM [☒ APPROVED] / DISAPPROVED [] : Columbia CHD

(Explanation of Violations on following page)

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

