

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

PERMIT #: 12-SC-2367408

APPLICATION #: AP1728583

DATE PAID: 9/3/71

FEE PAID: 425-00

RECEIPT #:__

DOCUMENT #: PR1648762

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: GERALD**21-0716 ROGERS	
PROPERTY ADDRESS: 787 SW HERON Fort White, FL 32038	List of the second
LOT: SUBDIVISION:	F25
PROPERTY ID #: 09925-127 [SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	EL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDAR 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.	S NOT GUARANTEE MATERIAL FACTS, TO MODIFY THE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS	
T [900] GALLONS / GPD Septic Tank CAPACITY	
A [] GALLONS / GPD N/A CAPACITY	
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALI	LONS]
K [] GALLONS DOSING TANK CAPACITY []GALLONS @[]DOSES PER 24 HRS	#Pumps []
D [250] SQUARE FEET Drainfield SYSTEM R [] SQUARE FEET N/A SYSTEM A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND [] I CONFIGURATION: [X] TRENCH [] BED [] N F LOCATION OF BENCHMARK: Nail in tree N. of site.	
I ELEVATION OF PROPOSED SYSTEM SITE [34.00] [INCHES FT] [ABOVE BELOW BENCHMARK/RE	PEPPENCE DOINE
E BOTTOM OF DRAINFIELD TO BE [49.00] [INCHES FT] [ABOVE BELOW BENCHMARK/RI	
L 49.00 [INCHES FI] [ABOVE / BELOW] BENCHMARK/ RE	FERENCE POINT
D FILL REQUIRED: [3.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES	
The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated 200 gpd.	d flow of
T	- 1
H	
E	
R	
SPECIFICATIONS BY: Dustin W Jones TITLE: Environmental Specialist	II
APPROVED BY: TITLE: Environmental Specialist II	Columbia CHD
DATE ISSUED: 09/16/2021 EXPIRATION DATE:	03/16/2023
DH 4016, 08/09 (Obsoletes all previous editions which may not be used)	
Incorporated: 64E-6.003, FAC	Page 1 of 3

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Incorporated 64E-6.001, FAC

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

PERMIT NO	0/-87/16
PERMIT NO.	1 A All
DATE PAID:	4/3/21
FEE PAID:	42500
RECEIPT #:	1728582

Page 1 of 4

	POR CONSTRUCTI	ON PERMIT	-	
APPLICATION FOR: [V] New System []				
	Existing System Abandonment		-	[] Innovative
APPLICANT: LINDA ROGERS	+ Ferald	Rogers		
AGENT: JUSTIN WINSLOW	PERMITS@JHOCALA	.сом	TELEP	PHONE: 352-351-8153
MAILING ADDRESS: 1748 NW 58T	H LN OCALA FL 34475			
			=========	
TO BE COMPLETED BY APPLICAN' BY A PERSON LICENSED PURSUAL APPLICANT'S RESPONSIBILITY ' PLATTED (MM/DD/YY) IF REQUE:	NT TO 489.105(3)(n TO PROVIDE DOCUMEN STING CONSIDERATION	n) OR 489.552, NTATION OF THE ON OF STATUTOR	FLORIDA STA DATE THE LO Y GRANDFATHI	OT WAS CREATED OR ER PROVISIONS.
PROPERTY INFORMATION				
LOT: BLOCK:	SUBDIVISION:			PLATTED:
PROPERTY ID #: 06-7S-17-099	925-127	ZONING:	I/M OR E	QUIVALENT: [Y/N]
PROPERTY SIZE: 10.57 ACRES	WATER SUPPLY: [] PRIVATE P	UBLIC []<=	=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 38	31.0065, FS? [Y/	A 1	DISTANCE	TO SEWER:FT
PROPERTY ADDRESS: 787 SW H	HERON DR FORT	WHITE FL 320	38	
DIDUCTIONS TO PROPERTY				
DIRECTIONS TO PROPERTY: Take	SW Old Niblack Ave to SW Tustenuggee Ave	SW Fellowship St	in Lake City	
Turn	right onto SW Fellowsl	nip St Turn left on	o SW Tustenu	ggee Ave
Sligh	t right to stay on SW Ti	ustenuggee Ave T	urn left onto U	S-41 N/US-441 N right onto NE Franklin St
BUILDING INFORMATION	[√] RESIDENTIA	L []	COMMERCIAL	
Unit many 6				
Unit Type of No Establishment			ial/Institut , Chapter 64	cional System Design
1 MOBILE HOME		28	, chapter of	E-0, FAC
2				
3	**************************************			
4	-		*	
[] Floor/Equipment Drains	[] Other (S	pecify)		
Comp				0/1/11
SIGNATURE: Gentally K	ezem_		DAT	NE: 7/3/34
OH 4015, 08/09 (Obsoletes pr	evious editions w	nich may not	e used)	

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 270716

				PART II - SITEPLAN ROGUES																		
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