



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

56
PERMIT NO. 23-1697
DATE PAID: 10/30/23
FEE PAID: 310.00
RECEIPT #: 2063340

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: DELTA OMEGA PROPERTIES INC

EMAIL: NFLSEPTICTANK@COMCAST.NET

AGENT: ROBERT FORD III- NORTH FLORIDA SEPTIC TANK INC

TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE STATE ROAD 100, LAKE CITY FL 32025

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: 3 BLOCK: PH 1 SUBDIVISION: CROSSWINDS PLATTED: _____

PROPERTY ID #: 24-4S-16-03117-103 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 0.88 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 735 SW CHESTERFIELD CIR, LAKE CITY FL

DIRECTIONS TO PROPERTY: _____

BUILDING INFORMATION

☒ RESIDENTIAL

☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC
1	NEW HOME	4	1618	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: _____

DATE: 10-2-2023

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

Incorporated 62-6.004, FAC



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

PERMIT #: 12-SC-2790662
APPLICATION #: AP2003340
DATE PAID: 10/13/23
FEE PAID: 31000
RECEIPT #: _____
DOCUMENT #: PR2013258

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: DELTA**23-0697 OMEGA PROPERTIES

PROPERTY ADDRESS: 735 SW CHESTERFIELD Lake City, FL 32024

LOT: 3 BLOCK: _____ SUBDIVISION: Crosswinds Phase I

PROPERTY ID #: 03117-103 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

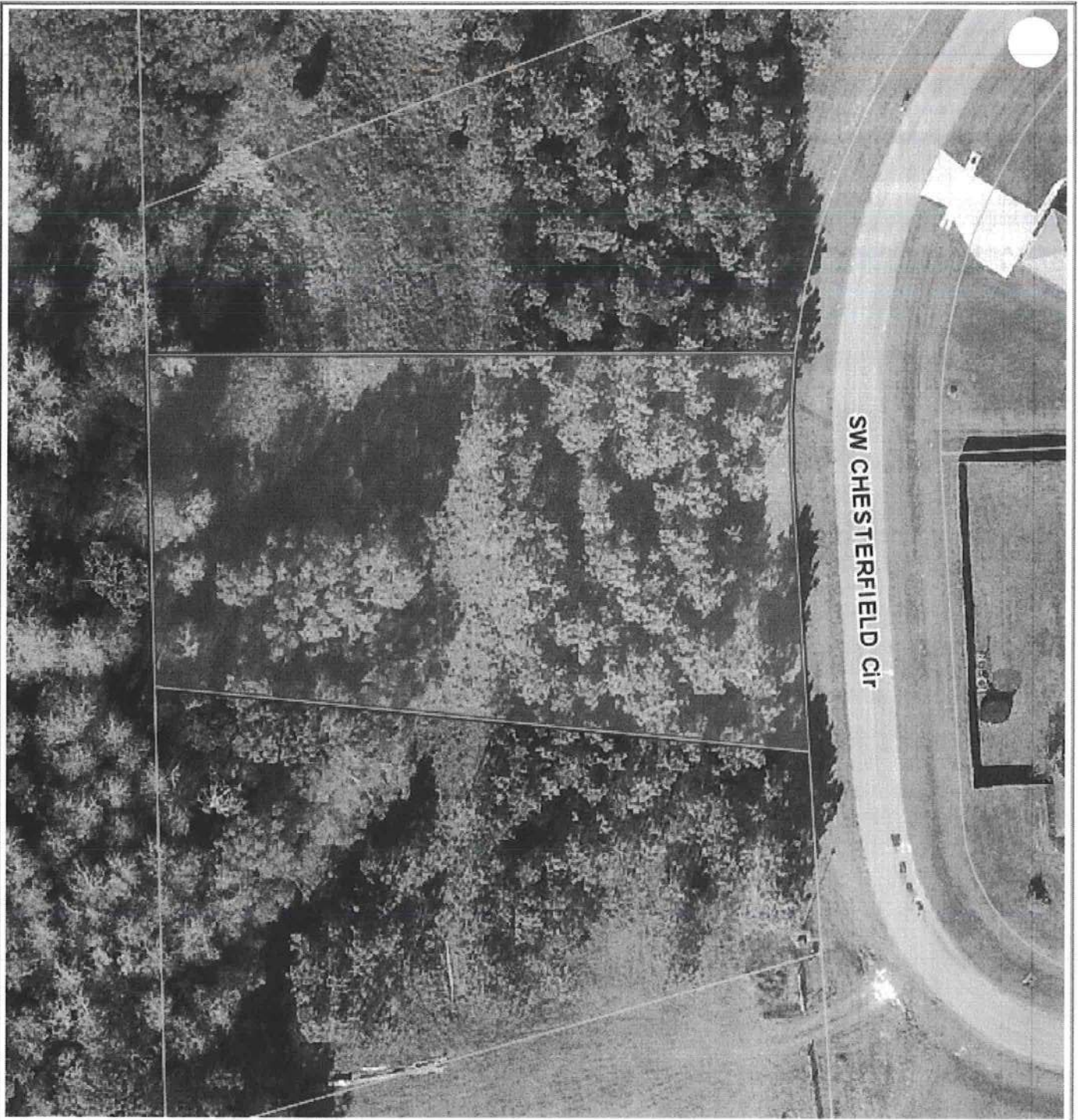
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [400] GALLONS / GPD Aerobic Unit Treatment CAPACITY
A [] GALLONS / GPD N/A CAPACITY
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DOSES PER 24 HRS #Pumps []
D [282] 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: Fence board E. across the street.
I ELEVATION OF PROPOSED SYSTEM SITE [36.00] [INCHES] FT [] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [48.00] [INCHES] FT [] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [6.00] INCHES EXCAVATION REQUIRED: [0.00] INCHES

O The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total estimated flow of 300 gpd.
T ***System will be 50% minimum nitrogen reducing ATU as required by BMAP restriction in code, using a 24" water table
H separation. Nitrogen reducing NSF-245 certified aerobic treatment unit required." Maintenance contract and operating
E permitting/fee also required.
R -Operating permit fee and application / 2yr singled maintenance entity contract agreement w/ owner required prior to final approval.

SPECIFICATIONS BY: Robert Ford TITLE: Master Contractor
APPROVED BY: Dustin W Jones TITLE: Environmental Specialist II Columbia CHD
DATE ISSUED: 10/11/2023 EXPIRATION DATE: 04/11/2025
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)
Incorporated 62-6.004, FAC



0 40 80 120 160 200 240 280 320 360 400 ft

Columbia County Property Appraiser Jeff Hampton | Lake City, Florida | 386-758-1083

PARCEL: 24-4S-16-03117-103 (15214) | TIMBERLAND 80-89 (5500) | 0.88 AC

LOT 3 CROSSWINDS S/D PHASE 1. QC 1152-452

DELTA OMEGA PROPERTIES INC

2023 Working Values

Owner: 3454 SW CR 242
LAKE CITY, FL 32024
Site: 735 SW CHESTERFIELD CIR, LAKE
CITY
Sales Info: NONE

Mkt Lnd	\$0	Appraised	\$395
Ag Lnd	\$395	Assessed	\$395
Bldg	\$0	Exempt	\$0
XFOB	\$0	county:	\$395
Just	\$28,000	Total	city:\$0
		Taxable	other:\$0
			school:\$395

NOTES:



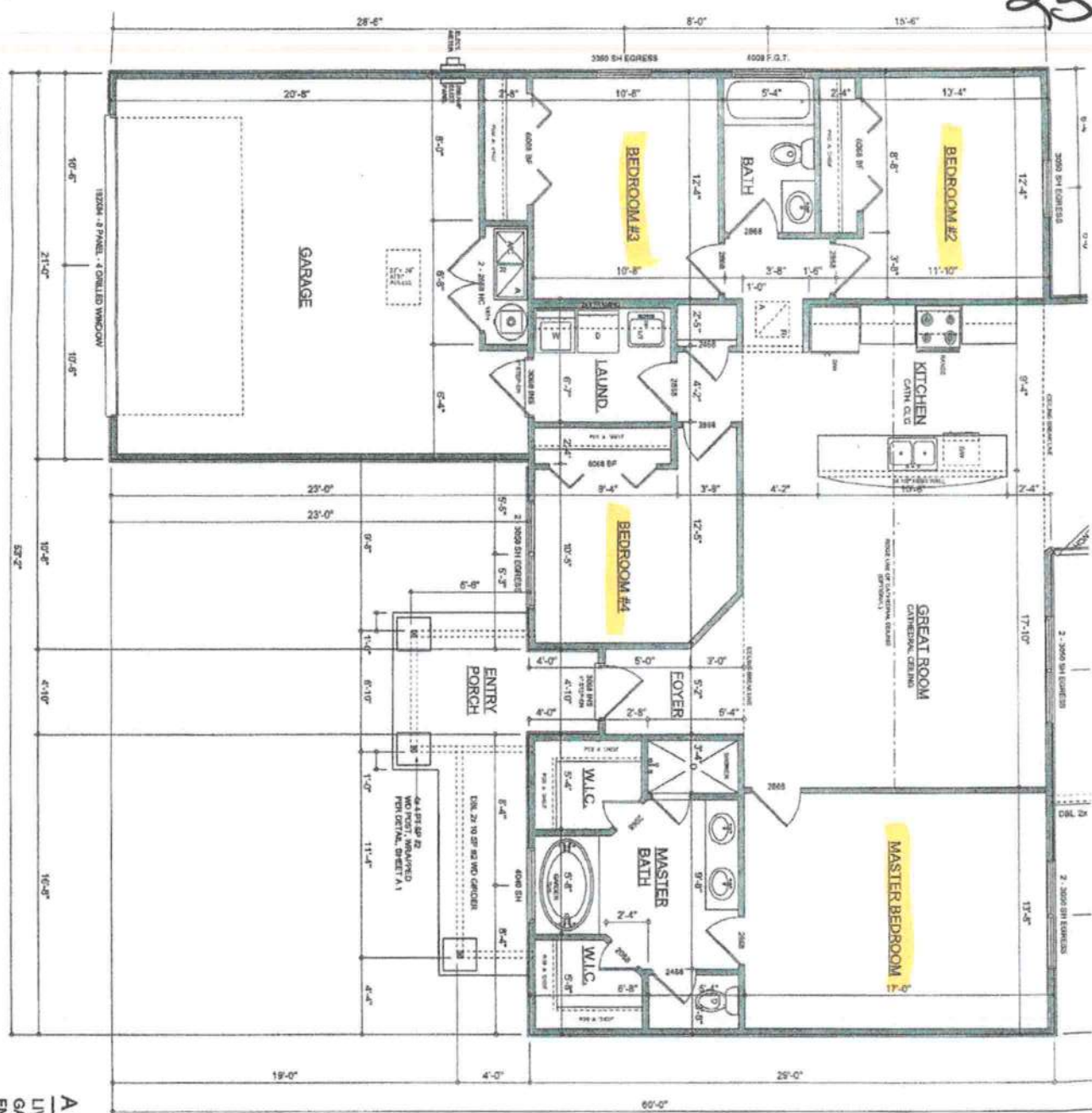
Columbia County, FL

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GrizzlyLogic.com

23-069

FLOOR PLAN
SCALE: 1/8" = 1'-0"
GENERAL NOTES:



AREA SUMMARY

LIVING AREA	1,618	S.F.
GARAGE AREA	461	S.F.
ENTRY PORCH AREA	106	S.F.
COVERED PORCH AREA	140	S.F.
TOTAL AREA	2,325	S.F.

*Revised
10-20-2023*

 <p>W.D. SMITH & ASSOCIATES, INC. 425 NW COMMERCIAL BLVD. STE. 100 LAKE CITY, FL 33508 (386) 759-8408 www.wdsmith.com</p>	<p>MODEL 1618 FOR:</p> <p>LOT 3, CROSSWINDS</p> <p>PROJECT ADDRESS: COLUMBIA COUNTY, FLORIDA</p> <p>RHETT SMITHEY</p> <p>LAKE CITY, FLORIDA</p>	<p>DIMENSIONED</p> <p>SCALE:</p> <p>TYPICAL WALL</p> <p>SCALE:</p>	
	<p>JOB NUMBER</p> <p>20230914</p>		
	<p>SHEET NUMBER</p> <p></p>		

63077

