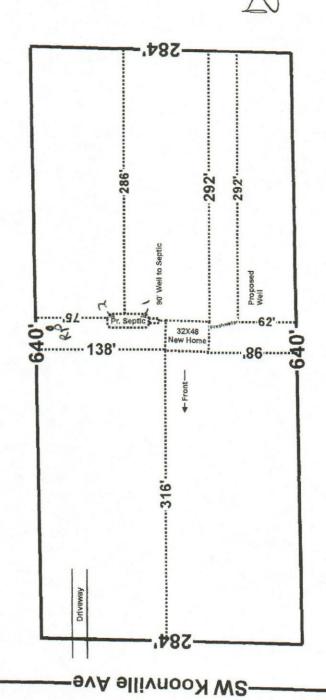


STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM (OSTDS)

PERMIT NO.	23-0501
DATE PAID:	7119728
FEE PAID:	310.00
RECEIPT #:	977799

APPLICATION FOR CONSTRUCTION PERMIT APPLICATION FOR: [] Existing System [] Holding Tank [] Innovative [] Abandonment [] Temporary [] [X] New System Repair APPLICANT: Ashley Arsua EMAIL: TELEPHONE: 352-356-1333 MAILING ADDRESS: 474 NE 628th St. Old Town, FL 32680 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 / (3)] LOT: _____BLOCK: ____SUBDIVISION: ____ PLATTED: PROPERTY ID #: 02-45-15-00330-012 ZONING: ____ I/M OR EQUIVALENT: [Y / 0] PROPERTY SIZE: S ACRES WATER SUPPLY: [A] PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / Ø] DISTANCE TO SEWER: ____FT PROPERTY ADDRESS: SW KOONVIlle Ave Lake City, 32024 DIRECTIONS TO PROPERTY: Take 90 W, The on Koonville to property on L. BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL Unit Type of No. of Building Commercial/Institutional System Design Bedrooms Area Sqft Table I, Chapter 62-6, FAC No Establishment 1 SFR-MH 3 1456 3 [] Floor/Equipment Drains []/ Other (Specify) 212064 DATE: 7-1423

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) Incorporated 62-6.004. FAC



Brody Pack 6/26/23

> Scale 1" = 100' SW Koonville Road, Lake City, FL Parcel: 02-4S-15-00330-012 Ashley Arsua

5.01 Acres
Columbia County

Apmeter Hear
21.3064
7-14-23

23-0502



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

PERMIT #: 12-SC-2756260

APPLICATION #: AP1977799

DATE PAID: 7/14/23

FEE PAID: 30.00

RECEIPT #:____

DOCUMENT #: PR1978809

CONSTRUCTION PERMIT FOR: OSTDS New	
APPLICANT: ASHLEY**23-0502 ARSUA	
PROPERTY ADDRESS: SW KOONVILLE Ave Lake City, FL 32024	
LOT: BLOCK: SUBDIVISION:	t formand dies e
PROPERTY ID #: 00330-012 [SECTION, TOWNSHIP, RANGE [OR TAX ID NUMBER]	E, PARCEL NUMBER]
SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APP PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE STATE, OR LOCAL PERMITTING REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.	E IN MATERIAL FACTS, LICANT TO MODIFY THE MADE NULL AND VOID.
SYSTEM DESIGN AND SPECIFICATIONS	
T [900] GALLONS / GPD New Multi-Chambered Septic CAPACITY	
A [] GALLONS / GPD N/A CAPACITY	
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 12	50 GALLONS]
K [] GALLONS DOSING TANK CAPACITY []GALLONS @[]DOSES PER 2	
D [462] SQUARE FEET Drainfield SYSTEM	
R [] SQUARE FEETN/A SYSTEM	
A TYPE SYSTEM: [] STANDARD [] FILLED [x] MOUND []	
CONFIGURATION: [x] TRENCH [] BED []	
N F LOCATION OF BENCHMARK: Nail with pink ribbon in oak near site	
I ELEVATION OF PROPOSED SYSTEM SITE [15.00] [INCHES / FT] [ABOVE / BELOW] BENCH	
E BOTTOM OF DRAINFIELD TO BE [9.00] [INCHES FT] [ABOVE BELOW] BENCH	MARK/REFERENCE POINT
L Company of the comp	
FILL REQUIRED: [24.00] INCHES EXCAVATION REQUIRED: [] INCHES	
The system is sized for 3 bedrooms with a maximum occupancy of 6 persons (2 per bedroom), for a total	estimated flow of
300 gpa.	
T	
H	1
	1
R	
SPECIFICATIONS BY: (Joshua) Kameron Keen TITLE: CEHP	
APPROVED BY: TITLE: Environmental Specialist I	Columbia CHD
DATE ISSUED: 07/17/2023 EXPIRATION	DATE: 01/17/2025
OH 4016, 08/09 (Obsoletes all previous editions which may not be used)	
Incorporated: 64E-6.003, FAC	Page 1 of 3

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

APPLICATION FOR CONSTRUCTION PERMIT

For the Application Number 93-0500

----- PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet 21.2069 Site Plan submitted by: Date 7-14-23 Plan Approved_ Not Approved County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DEP 4015, 08-21-2022 (Obsoletes previous editions which may not released incorporated: 62-6.004,F.A.C.

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7117/23