Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis Governor

Scott A. Rivkees, MD State Surgeon General

Vision: To be the Healthiest State in the Nation

March 16, 2020

Robert Minnella 25473 SW 22 PL Newberry, FL 32669

RE: Contingency Letter
Application Document No: AP1473376
Centrax Permit Number: 12-SC-2047624
OSTDS Number:
301 SW PARADISE GIn
Lake City, FL 32024

Lot:

Block:

Subdivision:

Dear Applicant:

This will acknowledge receipt of an application dated 03/13/2020 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:



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

	AN	NAAF	
PERMIT NO.	au-	174718	
DATE PAID:	31	13128	
FEE PAID:	401	5.00	*
RECEIPT #:	147	3374	

[]	ATION FOR: New System Repair		Existing Syst]	Holding Tank Temporary	1]	Innovative
APPLIC	ANT: Clemons, A	mber							
AGENT:	Robert Minnella					TEI	EPH	ONE :	352-472-6010
MAILIN	G ADDRESS: 25	743 SW 22	Pl. Newheny, Fl.	32669				F	ax 352-472-0104
TO BE BY A P APPLIC PLATTE	ANT'S RESPONS: D (MM/DD/YY)	APPLICAN PURSUA BILITY OF REQUE	NT OR APPLICAN ANT TO 489.109 TO PROVIDE DO STING CONSIDER	NT'S AUTHOR 5(3)(m) OR OCUMENTATION ERATION OF	489 N O STA	.552, FLORIDA F THE DATE THE TUTORY GRANDFA	STAT LOT	UTE WA	S CREATED OR OVISIONS.
	TY INFORMATION		THE COLUMN COLUMN WE HAVE USED THE COLUMN TO THE COLUMN TO	NO THE SECTION THE THE PARTY AND SECTION SEC	TN 30 31	and the first first first first start first start first first start first			
PROPER IS SEW PROPER DIRECT	TY ID #: 26-04 TY SIZE: 5.82 ER AVAILABLE A TY ADDRESS: 30	ACRES AS PER 3 01 SW Par	WATER SUPPLES 181.0065, FS? adise Gln. Lake Cit. 47 south to C-242.	ZONIN LY: [/] PR [No	IVA 8.4	TE PUBLIC [DISTAN]<=2	UIVA 2000 TO S	
BUILDI	NG INFORMATION	1	[√] RESII	DENTIAL		[] COMMERCI.	AL		114 F 10 10 10 10 10 10 10 10 10 10 10 10 10
	Type of Establishment		No. of Bedrooms	Building Area Sqft		mmercial/Insti ble 1, Chapter			l System Design FAC
1	DW Mobile Home		3	2254	4.19	Leople (New)			
2			-	ST-8007 (000000000000000000000000000000000		/		ne to beauty	
3	DW Mobile Home		3	1350	4.0	eople			
4	*************								
[]	Floor/Equipmer			extra programme sasted routes			DATE		3-12-2020

STATE OF FLORIDA

DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 30 -8 208 PART II - SITE PLAN _ 1" = 50" Amber Clemons 26-04-15-00401-026 210 1 Acre of 5.82 Acres 370 210 110 exists existing well 25' 672' Dash Marks Remove old home 310 Ve S.W. Paradise 3d x 382' GIn. Like for Like Notes: Replacement home. Site Plan submitted by: Date:03-12-2020 Agent V Plan Approved Not Approved County Health Department ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DH, 4015 08/05 (Obsoletes previous editions which may not be used) incorporated S4E-6.001,FAC Page 2 of 4

(Stock Number 5744-002-4015-6)