



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

PERMIT NO. 21-0392
DATE PAID: 4/22/21
FEE PAID: 310.00
RECEIPT #: 1658231

APPLICATION FOR:

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

APPLICANT: Annie Wimberly (Rose Bomar)

AGENT: ROBERT FORD III, NORTH FLORIDA SEPTIC TANK INC. TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE State Rd 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

LOT: 152 BLOCK: B SUBDIVISION: Town of Lulu PLATTED: _____

PROPERTY ID # 00-00-00-10418-000 ZONING: _____ I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 0.175 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 219 SE Lee Dr Lulu, FL

DIRECTIONS TO PROPERTY: TL on Marion Ave TL on Duval St, slight R,
TL on Douglas Rd, TL at 1st cross St, TR on Lee Dr,
219

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	<u>home</u>	<u>2</u>	<u>1050</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Rose W. Zeller

DATE: 4-22-2021



STATE OF FLORIDA
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SYSTEM

PERMIT #: **12-SC-2275225**
APPLICATION #: **AP1658307**
DATE PAID: **4/23/2014**
FEE PAID: **3/1**
RECEIPT #: **12-710-4953390**
DOCUMENT #: **PR1550304**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: ANNIE**21-0392 WIMBERLY

PROPERTY ADDRESS: 219 SE LEE Lulu, FL 32061

LOT: 12 BLOCK: SUBDIVISION: Town of Lulu

PROPERTY ID #: 10418-000 [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 [900] GALLONS / GPD New Sentic 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 [250] SQUARE FEET New drainfield SYSTEM
R [] SQUARE FEET N/A SYSTEM

A TYPE SYSTEM: [] STANDARD [] FILLED [X] MOUND []

I CONFIGURATION: [X] TRENCH [] BED []

F LOCATION OF BENCHMARK: Power pole in S of site

I ELEVATION OF PROPOSED SYSTEM SITE [24.00] INCHES FT [] ABOVE BELOW BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [6.00] INCHES FT [] ABOVE BELOW BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [36.00] INCHES EXCAVATION REQUIRED: [] INCHES

The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated flow of 200 gpd.

SPECIFICATIONS BY: William D Bishop II

TITLE: Master Septic Contractor

APPROVED BY: Kelli C. Rogers

TITLE: Environmental Specialist II

Columbia CHD

DATE ISSUED: 04/26/2021

EXPIRATION DATE: 10/26/2022

DN 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

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