



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

PERMIT NO. 25-0607
DATE PAID: 7/23/05
FEE PAID: 310.00
RECEIPT #: 224609

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Lexann Corp EMAIL: _____

AGENT: AEB Construction TELEPHONE: _____

MAILING ADDRESS: 2412 SW Dorton St. Ft White FL 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105 (3) (a) 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: NA BLOCK: NA SUBDIVISION: NA PLATTED: _____

PROPERTY ID # 33-36-17-06807-000 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 51 ACRES WATER SUPPLY: PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: NE Tomlin Dr. Lake City

DIRECTIONS TO PROPERTY: 90 East left on NE Chestnut

Ave Right on NE Washington St. Right on NE

Tomlin Dr. to property on Right

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	<u>SFR</u>	<u>3</u>	<u>980</u>	
2				
3				
4				

Floor/Equipment Drains Other (Specify) _____

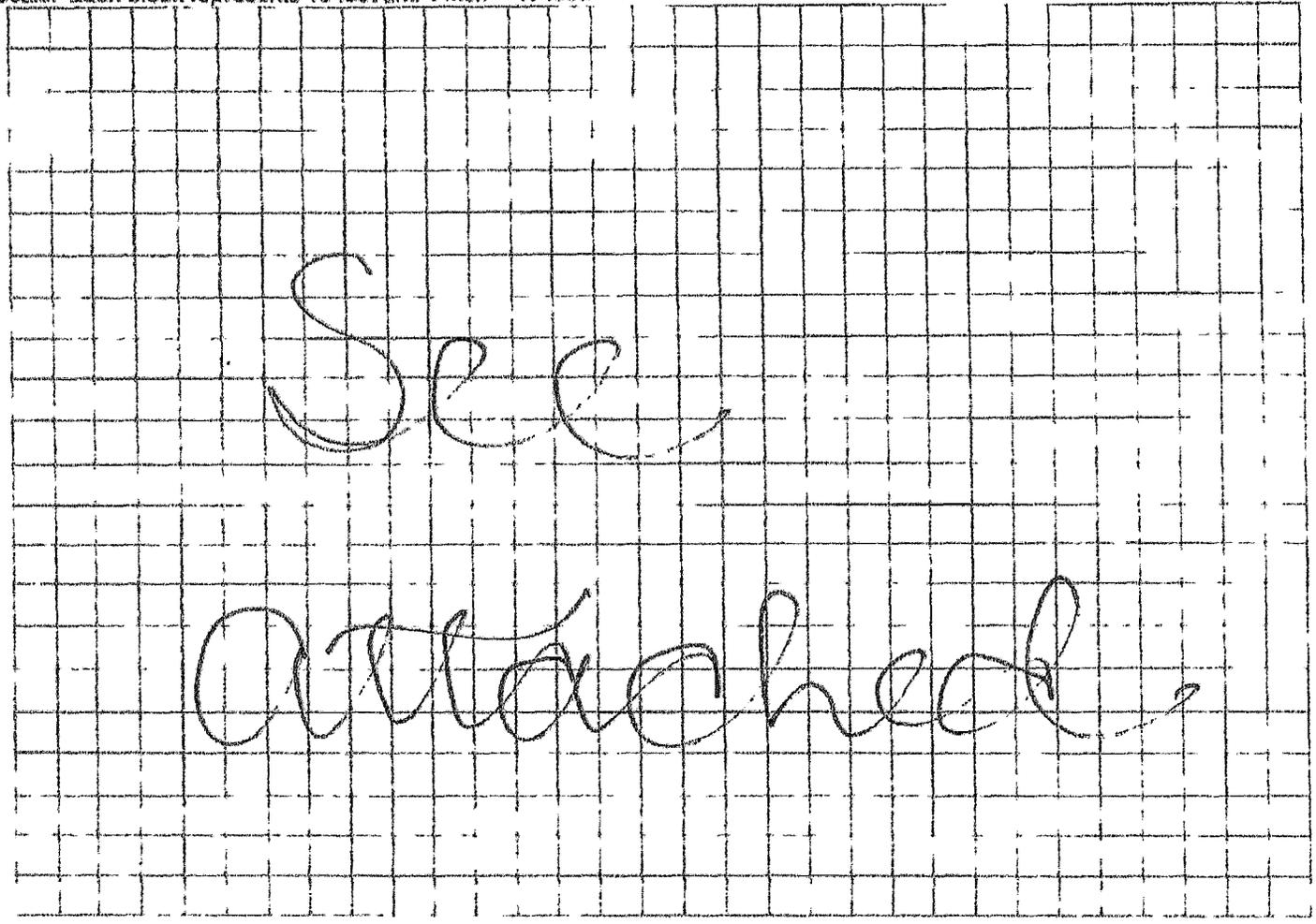
SIGNATURE: William D. Bishop II DATE: 7/21/05

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----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: William D. Bishop II
Plan Approved Not Approved Date 7/21/25
By [Signature] Columbia County Health Department
7/31/25

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

MN Levann Corp

1" = 40'

7/21/25

William D. Bishop II

