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

CR # 20-00335
PERMIT NO. 23-0591
DATE PAID: 8/15/23
FEE PAID: 310.00
RECEIPT #: 1983714

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: LEWIS EDWARDS

AGENT: ERKINGER CONSTRUCTION GROUP

TELEPHONE: (386) 754-5555

MAILING ADDRESS: 248 SE NASSAU STREET

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: 8 BLOCK: N/A SUBDIVISION: HERLONG JUNCTION PLATTED: _____

PROPERTY ID #: 07-6S-16-03787-016 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 10.000 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ NO ☐ DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: JEWEL COURT FORT WHITE

DIRECTIONS TO PROPERTY: TAKE STATE ROAD 47 SOUTH. TURN RIGHT ONTO SOUTHWEST HERLONG STREET AT CORNER WITH DREW FEAGLE AVENUE. STAY STRAIGHT ON SOUTHWEST TREASURE LANE. TURN LEFT ON SOUTHWEST JEWEL COURT. SITE AT END.

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 62-6, FAC
1	HOUSE	3	1,686	
2				
3				
4				

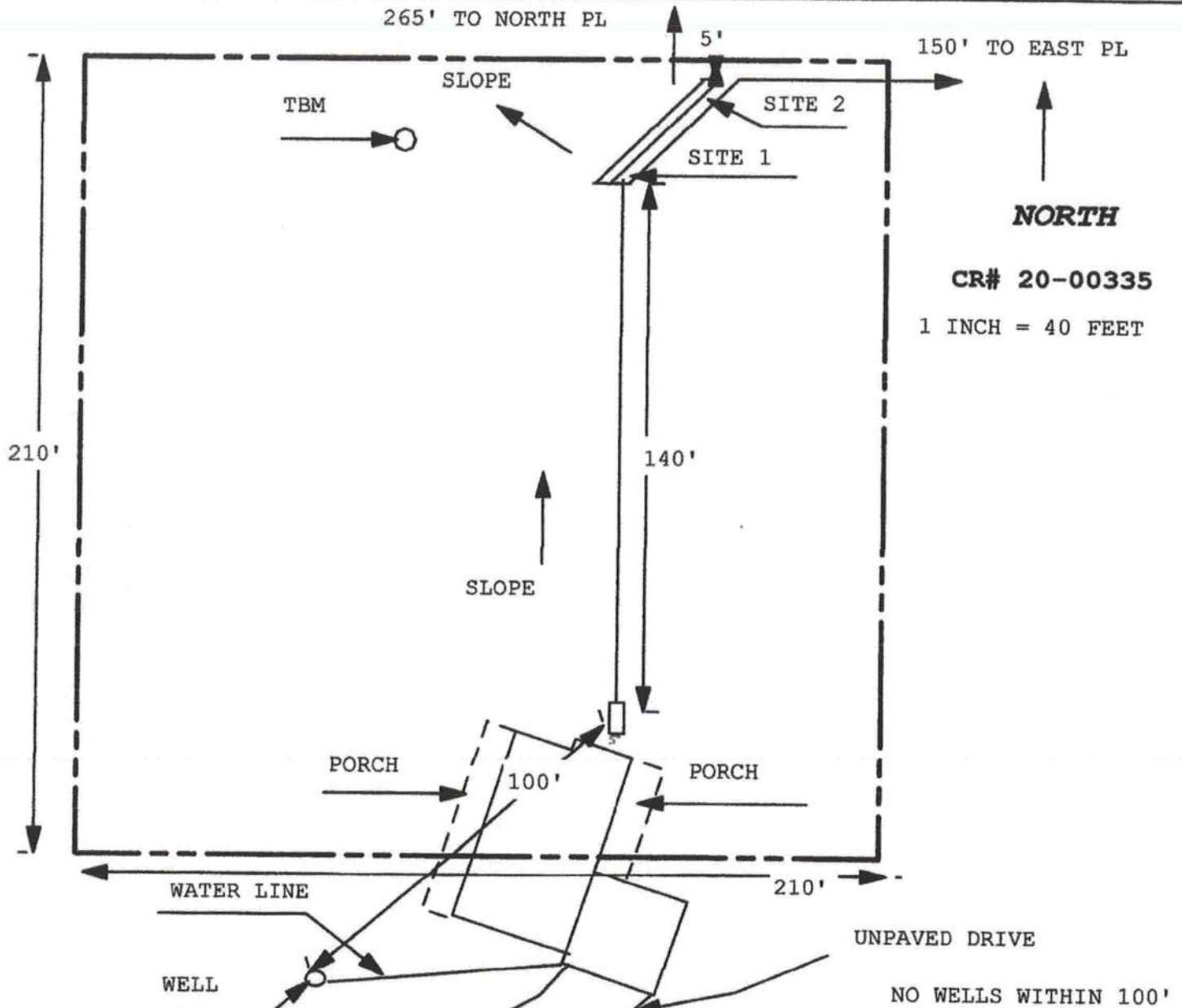
☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: [Signature] Pres.

DATE: 8-15-2023

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 23-0591

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. [Signature] Date 8/14/22
Plan Approved ✓ Not Approved _____ Date 8/14/22
By [Signature] CS2 Columbia CPHU

Notes: _____

LOT: 8 BLOCK: SUBDIVISION: HERLONG JUNCTION

PROPERTY ID #: 03787-016 [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 Multi-Chambered Septic 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 [375] 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: Nail in oak tree west of system site
I ELEVATION OF PROPOSED SYSTEM SITE [0.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [30.00] [INCHES / FT] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] INCHES

O
T
H
E
R
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.
140' of solid pipe tank to DF

SPECIFICATIONS BY: Sean P Havens TITLE: Environmental Specialist I
APPROVED BY: [Signature] TITLE: Environmental Specialist I Columbia CHD
DATE ISSUED: 08/17/2023 EXPIRATION DATE: 02/17/2025
DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

v 1.1.4

AP1983716

SE1882975

SF



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

PERMIT #: 12-SC-2765680
APPLICATION #: AP1983716
DATE PAID: 8/15/23
FEE PAID: 310.00
RECEIPT #: _____
DOCUMENT #: PR1984336

CONSTRUCTION PERMIT FOR: OSTDS New
APPLICANT: EDWARD**23-0591 LEWIS
PROPERTY ADDRESS: JEWEL Ct Fort White. FL 32038

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CLYATT WELL DRILLING, INC.

(Established in 1971)
5941 SW STATE ROAD 121
LAKE BUTLER, FL 32054
Phone (386)496-2488 *** FAX (386)496-4640

WELL DESCRIPTION

DESCRIPTION DATE

4/27/2023

CUSTOMER NAME AND ADDRESS

Erkinger Construction Group
248 SE Nassau Street
Lake City, FL 32025

DESCRIPTION OF WORK

DESCRIPTION

Feet 4" Well
1 HP Submersible Pump
Feet 1-1/4" Drop Pipe
Feet 14/3 Submersible Pump Wire
81 Gallon Pressure Tank
4 X 1-1/4 Well Seal
Pressure Relief Valve
Controls and Fittings
7.5% Sales Tax

The above description is provided to give a brief description of the water well to be constructed by Clyatt Well Drilling, Inc.

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COLUMBIA COUNTY

911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
263 NW Lake City Ave., Lake City, FL 32055
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: gis@columbiacountyfla.com



Application for 9-1-1 Address Assignment Form

**NOTE: ADDRESS ASSIGNMENT MAY REQUIRE UP TO 10 WORKING DAYS.
IF THE ADDRESSING DEPARTMENT NEEDS TO CONDUCT ON SITE GPS LOCATION
IDENTIFICATION OR OTHER ACTIONS, ADDITIONAL TIME MAY BE REQUIRED.**

Date of Request: 8-14-2023

REQUESTER Last Name: Erkinger

First Name: Matthew

Contact Telephone Number: (386) 754-5555

(Cell Phone Number if Provided): (386) 623-0751

Requested for Self: ☐ or Requested for Company: ☒
(check one)

If Address is Requested by a Company, Provide Name of Requesting Company:

Erkinger Construction Group

Parcel Identification Number: 07-65-16-03787 - 016(45773)

If in Subdivision, Provide Name Of Subdivision:

Herlong Junction

Phase or Unit Number (if any): Block Number (if any):

Lot Number: 8

**Attach Site Plan or you may use page 2 of Application Form for Site Plan:
Requirements for Site Plan Are Listed on page 2 of Application Form:
(NOTE: Site Plan Does NOT have to be a survey or to scale; FURTHER a
Environmental Health Dept. Site Plan showing only a 210 by 210 cutout of a
property will NOT suffice for Addressing Application Requirements.)**

Addressing / GIS Department Use Only:

Date Received: _____

Received by: Walk in: _____ Fax: _____ Email: _____ Other: _____

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SITE PLAN

FOR: EDWARD J. and Ann E. LEWIS
LOT # 8 HERLONG JUNCTION, JEWEL COURT
FORT WHITE, COLUMBIA COUNTY
PARCEL ID# 07-65-16-03787-016

