



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

PERMIT NO. 24-0719  
DATE PAID: 9/20/24  
FEE PAID: 48.25  
RECEIPT #: 2147202

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Seth E. Carter

EMAIL: seth.carter1187@gmail.com

AGENT: N/A

TELEPHONE: (386) 965 8523

MAILING ADDRESS: 1007 SW Watson St. Fort 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) (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 ☒ N

LOT: P1026 BLOCK: \_\_\_\_\_ SUBDIVISION: Big Oaks Lakes PLATTED: \_\_\_\_\_

PROPERTY ID #: 26-55-14-03717-127 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 5 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐  $\leq 2000$  GPD ☐  $> 2000$  GPD

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

PROPERTY ADDRESS: 1007 SW Watson Street Fort White, FL 32038

DIRECTIONS TO PROPERTY: \_\_\_\_\_

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	Storage Building	0	720	ORIGINAL ATTACHED
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: 9/18/24

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

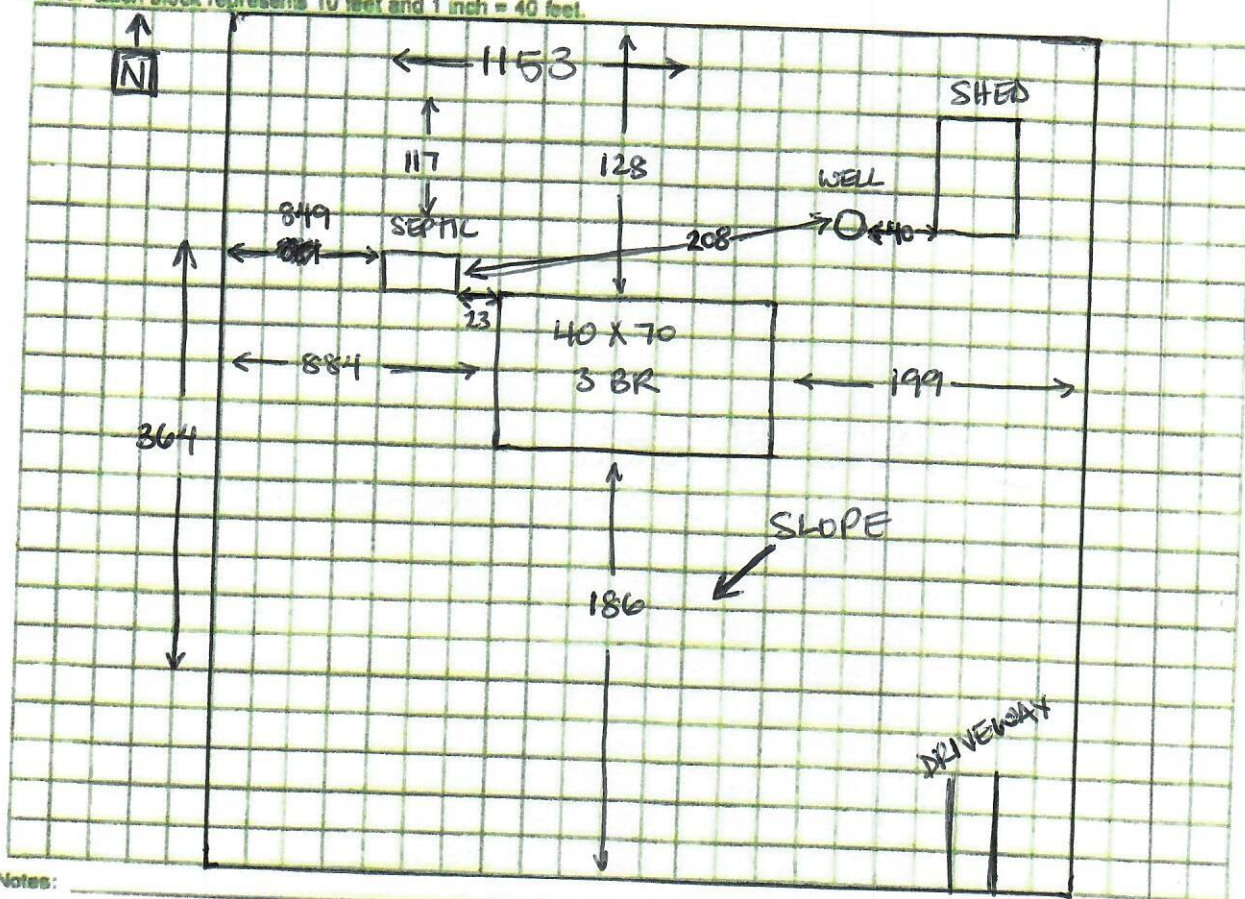


STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number: 24-0719

PART II - SITEPLAN

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



Notes:

*please sign below*

Site Plan submitted by: Sam E. Carter

Plan Approved

Not Approved

By: [Signature] ES2 Columbia Date: 10/1/24  
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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