



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

PERMIT #: 12-SC-4043995  
APPLICATION #: AP2274850  
DATE PAID: \_\_\_\_\_  
FEE PAID: \_\_\_\_\_  
RECEIPT #: \_\_\_\_\_  
DOCUMENT #: PR2348003

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: ELLSWORTH\*\*25-0848 MCGUIRE

PROPERTY ADDRESS: 346 SW CHARLES Lake City, FL 32024

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

PROPERTY ID #: 00389-001

[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 [ ]

F LOCATION OF BENCHMARK: Oak tree west of site

I ELEVATION OF PROPOSED SYSTEM SITE [ 24.00 ] [ INCHES ] FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
E BOTTOM OF DRAINFIELD TO BE [ 42.00 ] [ INCHES ] FT ] [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
L

D FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [ ] INCHES

O 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.

T

H

E

R

SPECIFICATIONS BY: Robert Ford

TITLE: Master Contractor

APPROVED BY:   
Sean P. Havens

TITLE: Environmental Specialist I

Columbia CHD

DATE ISSUED: 10/30/2025

EXPIRATION DATE: 04/30/2027

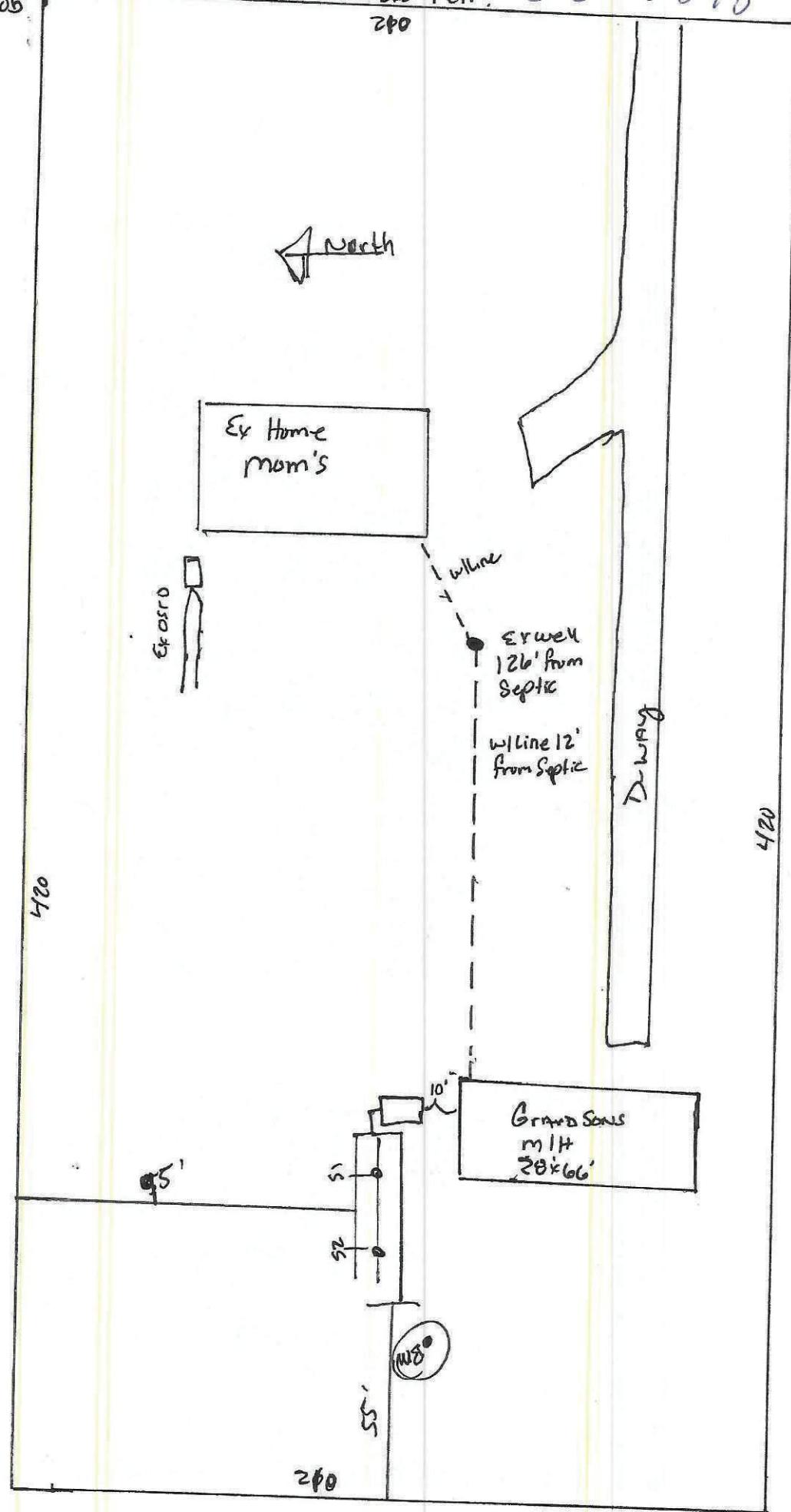
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)  
Incorporated 62-6.004, FAC

Page 1 of 3

1" = 40' McGuire Job  
Progrw Job # 10-27-2025

Charles Terr. 25-0848

260



STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

1" = 40

Permit Application Number

25-0848

PART II - SITEPLAN

McGuire

See att.

Notes: \_\_\_\_\_

Site Plan submitted by: Robert Fred Gogos 10-27-2025

Plan Approved ✓

By \_\_\_\_\_

Not Approved \_\_\_\_\_

Columbia

Date 10/27/25

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.



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

PERMIT NO. 25-0848  
DATE PAID: 10/29/2025  
FEE PAID: \$310.00  
RECEIPT #: 2274850

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System     Existing System     Holding Tank     Innovative  
 Repair     Abandonment     Temporary   

APPLICANT: Elsworth McGuire

AGENT: ROBERT FORD III- NORTH FLORIDA SEPTIC TANK INC

MAILING ADDRESS: 741 SE STATE ROAD 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

OSTDS REMEDIATION PLAN? [ Y / N ]

LOT: 1 BLOCK: 1 SUBDIVISION: 1 PLATTED:

PROPERTY ID #: 2545-15-00389-001 ZONING:  I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 2.02 ACRES WATER SUPPLY:  PRIVATE  PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / X ]

DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 340 SW Charles Ter, Lake City FL 32024

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	<u>Used MH</u>	<u>3</u>	<u>1848</u>	
2				
3				
4				

Floor/Equipment Drains     Other (Specify)

SIGNATURE: Robert Ford III

DATE: 10-27-2025

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  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM (OSTDS)

PERMIT NO. 25-0854  
DATE PAID: 10/30/25  
FEE PAID: 185.00  
RECEIPT #: 2275160

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System     Existing System     Holding Tank     Innovative  
 Repair     Abandonment     Temporary   

APPLICANT: LEE YD

EMAIL: NFLSEPTICTANK@COMCAST.NET

AGENT: ROBERT FORD III- NORTH FLORIDA SEPTIC TANK INC

TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE STATE ROAD 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

OSTDS REMEDIATION PLAN?  Y  N

LOT: 14    BLOCK: Unit 2    SUBDIVISION: East Wood    PLATTED: 1980

PROPERTY ID #: 15-48-1708360-192    ZONING: SF    I/M OR EQUIVALENT:  Y  N

PROPERTY SIZE: 0.33 ACRES    WATER SUPPLY:  PRIVATE PUBLIC  PUBLIC <=2000GPD  >2000GPD  
IS SEWER AVAILABLE AS PER 381.0065, FS?  Y  X

DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: 233 SE Sardia Way Lake City

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	<u>Sf</u>	<u>3</u>	<u>1400</u>	<u>ORG</u>
2				
3				
4				

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

SIGNATURE: Robert Ford III

DATE: 10/29/25

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



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

PERMIT #: 12-SC-4044586  
APPLICATION #: AP2275160  
DATE PAID: \_\_\_\_\_  
FEE PAID: \_\_\_\_\_  
RECEIPT #: \_\_\_\_\_  
DOCUMENT #: PR2348260

CONSTRUCTION PERMIT FOR: OSTDS Repair

APPLICANT: LEE\*\*25-0854 YU

PROPERTY ADDRESS: 233 SE SANDIA Lake City, FL 32055

LOT: 14 BLOCK: \_\_\_\_\_ SUBDIVISION: Eastwood U-2

PROPERTY ID #: 08360-192

[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]  
[OR TAX ID NUMBER]

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SYSTEM DESIGN AND SPECIFICATIONS

T [ 900 ] GALLONS / GPD Existing septic tank CAPACITY  
A [ 0 ] GALLONS / GPD CAPACITY  
N [ 0 ] 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 [ 0 ] SQUARE FEET SYSTEM

A TYPE SYSTEM:  STANDARD  FILLED  MOUND [    ]  
I CONFIGURATION:  TRENCH  BED [    ]

F LOCATION OF BENCHMARK: Small tree north of site

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

E BOTTOM OF DRAINFIELD TO BE [ 48.00 ] [ INCHES ] / FT [ ABOVE / BELOW ] BENCHMARK/REFERENCE POINT  
L

D FILL REQUIRED: [ 0.00 ] INCHES EXCAVATION REQUIRED: [    ] INCHES

O 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.

T Minimum required drainfield is 225sqft due to age of home, contractor has requested to update system to new code standards with 375sqft. System may also be as deep as original at 50" BBM but contractor has requested 48" BBM.

E Required drainfield area based on Rule 62-6.015(6)(c)2., F.A.C.

R

SPECIFICATIONS BY: Robert Ford

TITLE: Master Contractor

APPROVED BY: Sean P. Havens

TITLE: Environmental Specialist I

Columbia

CHD

DATE ISSUED: 11/03/2025

EXPIRATION DATE:

02/01/2026

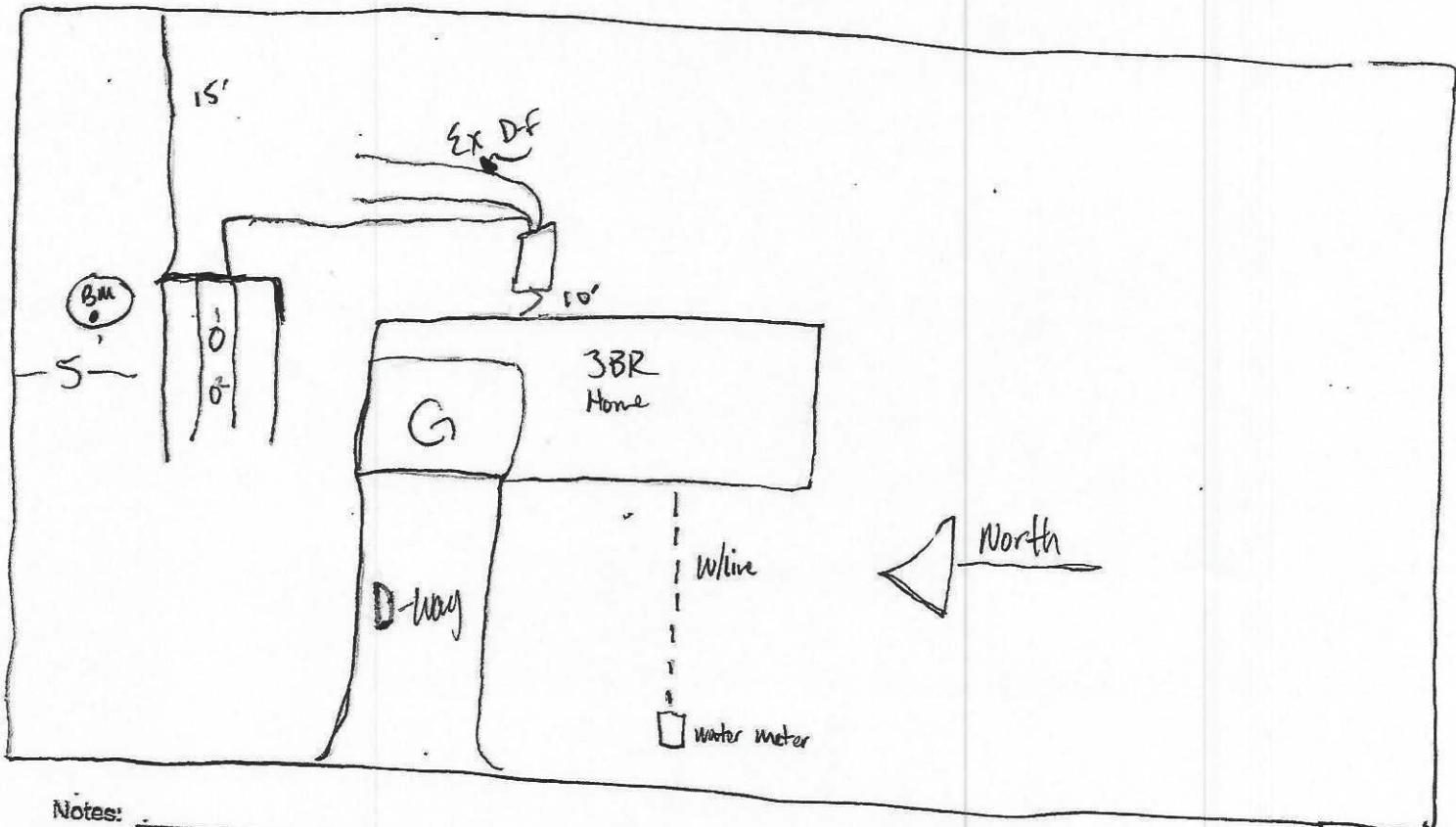
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STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 25-0854  
LEE Y.V. 233 SE Sandia Way

PART II - SITEPLAN



Notes: \_\_\_\_\_

Site Plan submitted by: Robert Foy, 999

Plan Approved ✓

By \_\_\_\_\_

Not Approved \_\_\_\_\_

Columbia

Date 10/29/25

County Health Department

11/3/25

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