



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

PERMIT NO. 22-0777
DATE PAID: 9/12/22
FEE PAID: 375.00
RECEIPT #: 1880434

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT:

James Pairrier

EMAIL:

rockyford@windstream.net

AGENT:

A&B Construction

TELEPHONE:

386-497-2311

MAILING ADDRESS:

546 SW Dortch St, Ft. White, FL.

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: NA BLOCK: NA SUBDIVISION: NA PLATTED: _____

PROPERTY ID #: 34-48-16-03271-001 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 39.21 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

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

PROPERTY ADDRESS:

SW Reginald Place, Lake City, FL.

DIRECTIONS TO PROPERTY:

TL onto SW Sisters Welcome Rd, cont.
Onto SW Dial Ave, TR onto SW King St, TL onto
SW Mauldin Ave, TL onto SW Reginald Pl. &
Keep straight onto 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 SF Residential

4

3118

2

3

4

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE:

William D. Bishop II

DATE:

8-24-22

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 22-0777

Poirrier

PART II - SITEPLAN

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

Site plan grid area. The grid is 20 blocks wide by 20 blocks high. The text "See attached" is written diagonally across the center of the grid.

Notes: _____

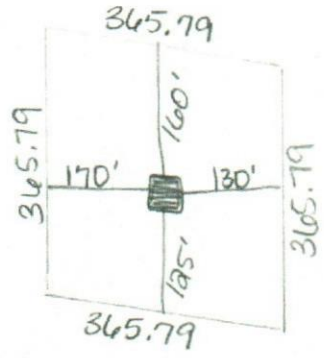
Site Plan submitted by: William D. Bishop II master contractor
Plan Approved [Signature] Not Approved _____ Date 9/15/22
By [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

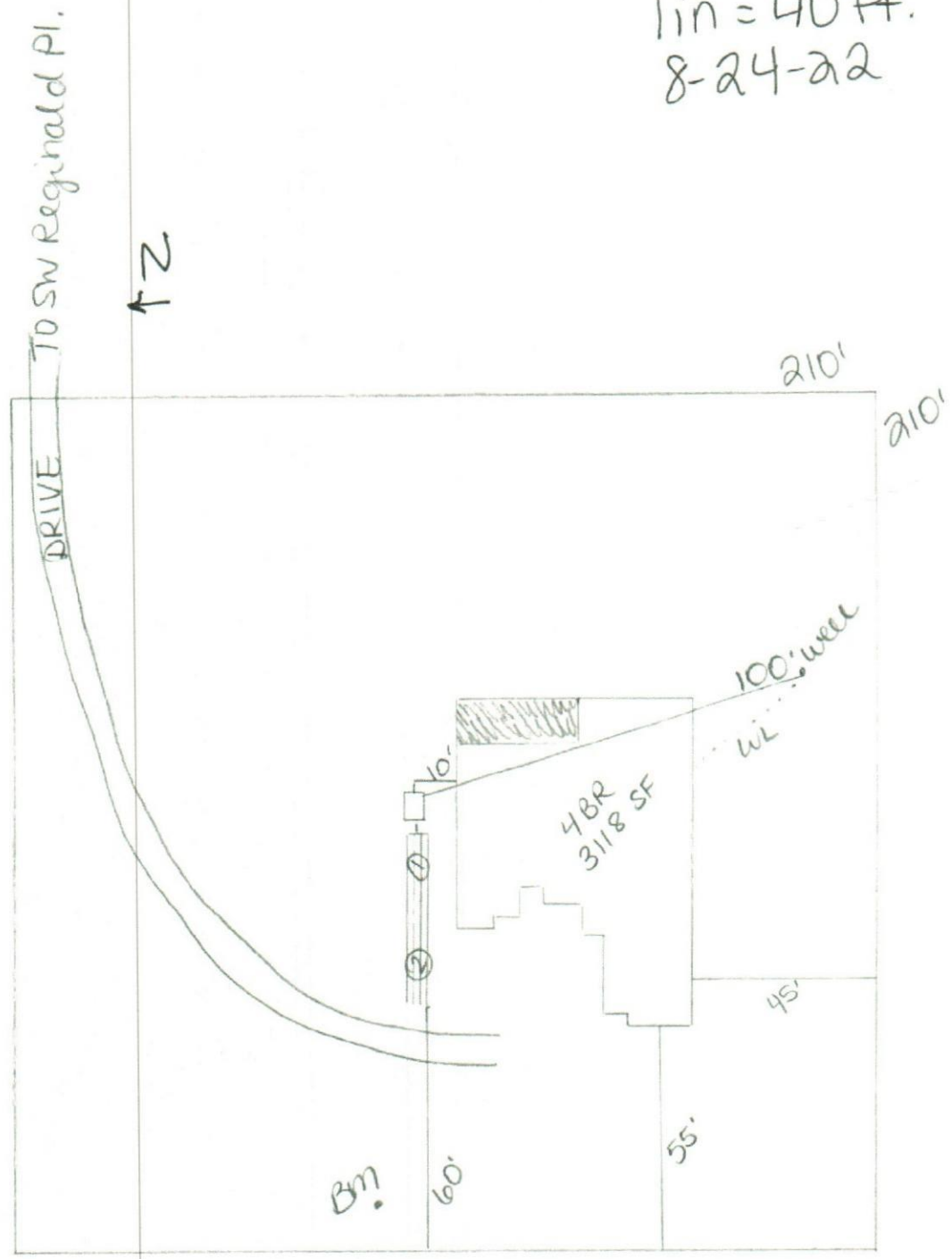
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

Incorporated: 62-6.004, F.A.C.

22-0777
 Poirrier
 lin = 40 ft.
 8-24-22



1 acre of 39.21



William D. Bishop II



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

PERMIT #: 12-SC-2567490
APPLICATION #: AP1880434
DATE PAID: 9/13/22
FEE PAID: _____
RECEIPT #: _____
DOCUMENT #: PR1828077

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: JAMES**22-0777 POIRRIER

PROPERTY ADDRESS: SW REGINALD Lake City, FL 32024

LOT: _____ BLOCK: _____ SUBDIVISION: _____

PROPERTY ID #: 03271-001

[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 [1,050] GALLONS / GPD Septic Tank 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 [500] 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: Nail in oak W. of site.

I ELEVATION OF PROPOSED SYSTEM SITE [12.00] [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: [0.00] INCHES

O The system is sized for 4 bedrooms with a maximum occupancy of 8 persons (2 per bedroom), for a total estimated flow of 400 gpd.

T
H
E
R

SPECIFICATIONS BY: WILLIAM D BISHOP

TITLE: SA0890009; SM0081587

APPROVED BY: _____

Dustin W Jones

TITLE: Environmental Specialist II

Columbia CHD

DATE ISSUED: 09/15/2022

EXPIRATION DATE: 03/15/2024

DE 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated. 64E-6.003, FAC

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