



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

APPLICATION FOR CONSTRUCTION PERMIT

CR # 10-7714

PERMIT NO. 20-0673
DATE PAID: 8/18/20
FEE PAID: 310.50
RECEIPT #: 1552516

APPLICATION FOR:

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

APPLICANT: RANDELL & LILIAN DUTTON

AGENT: RJH CONSTRUCTION - Tabitha Sibel

TELEPHONE: (954) 444-7941

MAILING ADDRESS: 6509 264TH ST.

BRANFORD

FL 32008

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: 28 BLOCK: N/A SUBDIVISION: SOUTHERN LANDINGS PLATTED: _____

PROPERTY ID #: 12-4S-16-02941-128 ZONING: RES I/M OR EQUIVALENT: ☐ NO ☐

PROPERTY SIZE: 0.740 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: 200 ORANGE BLOSSOM CT. LAKE CITY

DIRECTIONS TO PROPERTY: 90 WEST, TURN LEFT ON SISTERS WELCOME RD. TURN LEFT ON BROTHERS ST. TURN LEFT ON PLANTATION, TURN LEFT ON ORANGE BLOSSOM CT. SITE AT END ON LEFT.

BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>HOUSE</u>	<u>2</u>	<u>1,900</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Tabitha Sibel

DATE 8/14/20



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

PERMIT #: **12-SC-2139011**
APPLICATION #: **AP1552516**
DATE PAID: **8/18/20**
FEE PAID: **30.00**
RECEIPT #:
DOCUMENT #: **PR1393801**

CONSTRUCTION PERMIT FOR: OSTDS New

APPLICANT: RANDELL**20-0673 DUTTON

PROPERTY ADDRESS: 200 ORANGE BLOSSOM Ct Lake City, FL 32024

LOT: 28 BLOCK: SUBDIVISION: Southern Landings

PROPERTY ID #: 02941-128 [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: [] STANDARD [x] FILLED [] MOUND []

I CONFIGURATION: [x] TRENCH [] BED []

N

F LOCATION OF BENCHMARK: Nail in 20" oak tree north of system site

I ELEVATION OF PROPOSED SYSTEM SITE [36.00] [INCHES] / FT [] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [40.00] [INCHES] / FT [] [ABOVE / BELOW] BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [14.00] INCHES EXCAVATION REQUIRED: [] INCHES

O The system is sized for 2 bedrooms with a maximum occupancy of 4 persons (2 per bedroom), for a total estimated flow of 300 gpd.

T

H

E

R

SPECIFICATIONS BY: PAUL LLOYD TITLE: PSE

APPROVED BY: Sean B. Havens TITLE: Environmental Specialist I Columbia CHD

DATE ISSUED: 08/19/2020 EXPIRATION DATE: 02/19/2022

DH 4016, 08/09 (Obsoletes all previous editions which may not be used)

Incorporated: 64E-6.003, FAC

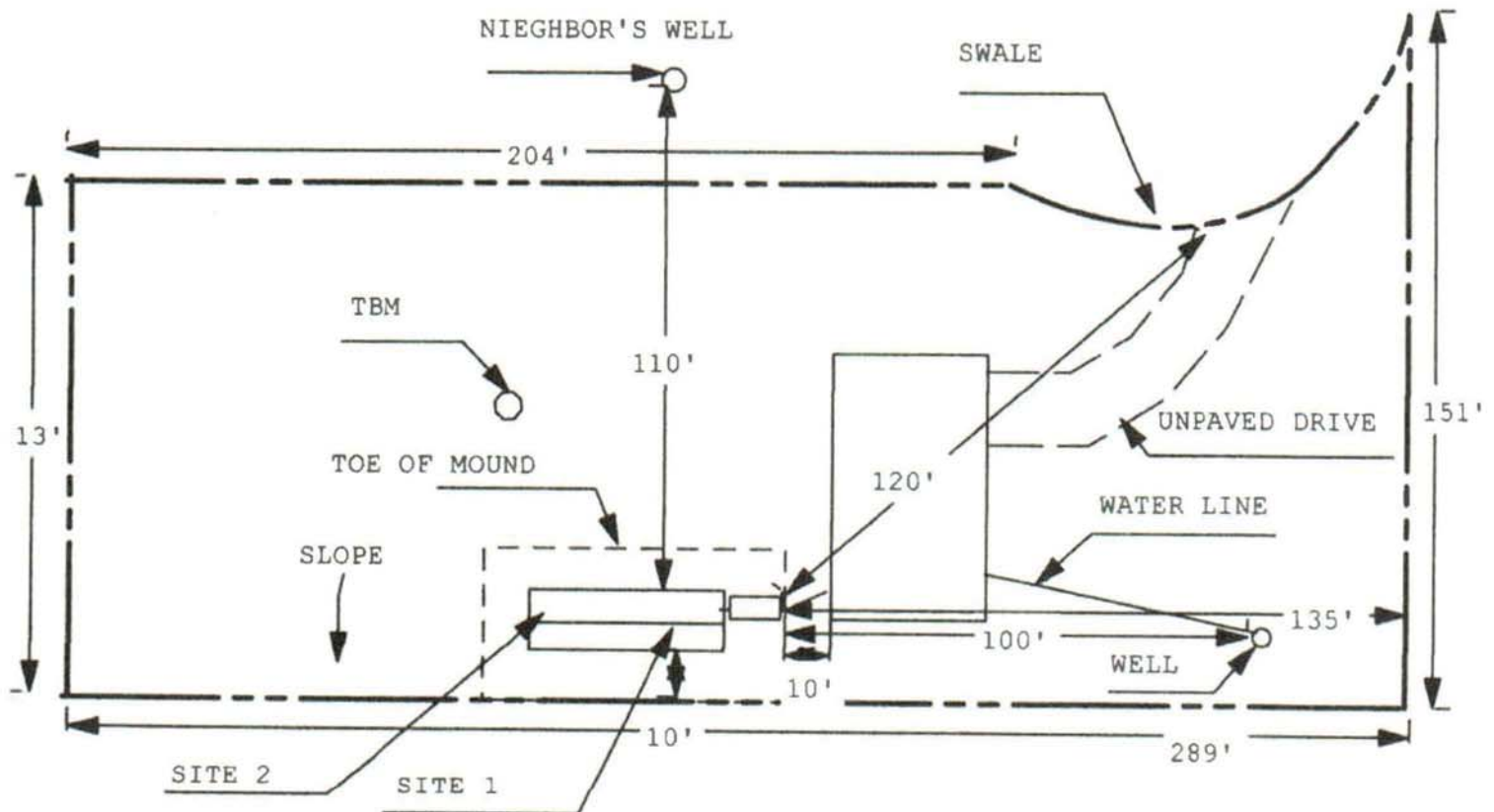
SK

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 20-0673

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

NORTH

CR# 10-7714



NO WELLS WITHIN 100'

1 INCH = 40 FEET

Site Plan Submitted By Paul K. Kapp Date 8/17/20
Plan Approved Not Approved Date 8/19/20

By [Signature] Columbian CPHU

Notes: _____