

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

PERMIT #: 12-SC-1380476

APPLICATION #: AP1053844

DATE PAID: 11/29/11
FEE PAID: 475.00

RECEIPT #: 1288099

DOCUMENT #: PR860706

CONSTRUCTION PERMIT FOR	R: OSTDS New	_				
APPLICANT: DEBRA**11-	0491 WEAVER	- 0				
PROPERTY ADDRESS: 38	5 MILL Ln Lake City, FL 32024					
LOT: BL	OCK: SUBDIVISION:					
PROPERTY ID #: 0415-0	22	[SECTION, TOWNSHIP, RANGE, PARCE [OR TAX ID NUMBER]	L NUMBER]			
381.0065, F.S., AND SATISFACTORY PERFORMA WHICH SERVED AS A PERMIT APPLICATION. ISSUANCE OF THIS PR	NCE FOR ANY SPECIFIC PERIOD BASIS FOR ISSUANCE OF THIS SUCH MODIFICATIONS MAY RESULT	TMENT APPROVAL OF SYSTEM DOES OF TIME. ANY CHANGE IN PERMIT, REQUIRE THE APPLICANT IN THIS PERMIT BEING MADE PPLICANT FROM COMPLIANCE WITH				
SYSTEM DESIGN AND SPEC	IFICATIONS					
	/ GPD N/A REASE INTERCEPTOR CAPACITY [MAXIM	CAPACITY CAPACITY MUM CAPACITY SINGLE TANK:1250 GALLO ALLONS @[]DOSES PER 24 HRS	ONS] #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 with orange ribbon in Oak.						
I ELEVATION OF PROPOSED SYSTEM SITE [23.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/REFERENCE POINT E BOTTOM OF DRAINFIELD TO BE [36.00] [INCHES FT] [ABOVE BELOW] BENCHMARK/REFERENCE POINT L						
	5.00] INCHES EXCAVATION RE	QUIRED: [0.00] INCHES				
The licensed contractor in s. 64E-6.013(3)(f), FAC.		ng the minimum category of tank in accordance	ce with			
SPECIFICATIONS BY: Jeremy X Gifford TITLE: Environmental Specialist I						
APPROVED BY:	TITLE: Environ	mental Specialist I	Columbia CHD			
	2/06/2011	EXPIRATION DATE:	06/06/2013			
DH 4016, 08/09 Obsole Incorporated: 64E-6.00	previous editions which ma 03, FAC v 1.1.4 AP1053844	-	Page 1 of 3			



STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

	Welle.		Permit Application Number)-1-11
	ach block represents 5 feet and 1 in	——— PART II - SITE ch = 50 feet.	PLAN	
cale: E	136' 136' 136' 136' 2.51 ac Pava Eusineration 315' Occupred auoss Shut Uth Septic >100'	210' 210'	Cauped wen septic >10 30 y 52 8M 1 / Maon 1 / Maon	or var se >100'
		Mil C	mounid	
	Physoled Septic to be in		e and as existing.	
	n submitted by: Deblice	Włauly		Title
	Approved Not Approved		01	2) (c) ((
MX	ALL)CHANGES MUST	BE APPROVED BY TH	HE COUNTY HEALTH DEPARTMENT	ант Берантеп