

#10-860-92



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

PERMIT NO. 61-003-20
DATE PAID: \$185
FEE PAID: 1-2-20
RECEIPT #: C-4514052
AP1459812

APPLICATION FOR:

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

APPLICANT: Alachua County Health AuthorityAGENT: Jeff Hardee (Hardee Environmental and Permitting)TELEPHONE: 352-949-0592MAILING ADDRESS: 6450 NW 72 Lane, Chiefland, FL 32626 EMAIL: JeffHardeeHEP@aol.com

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: 1 BLOCK: NA SUBDIVISION: Thistle Hills West PLATTED: _____

PROPERTY ID #: 17-118-05081-001-000 ZONING: R-2 I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 1.5 ACRES WATER SUPPLY: ☐ PRIVATE PUBLIC ☐ <2000GPD ☒ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N

DISTANCE TO SEWER: NA FTPROPERTY ADDRESS: 17094 SW 141st Archer

DIRECTIONS TO PROPERTY: Archer Rd to Archer T/L South on
SR41 then T/L onto SW 143 Ave, T/R SW 170st
T/L SW 141 PL lot at end on Right

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	House	4	1225	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Jeff HardeeDATE: 12-17-19

DE 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
EXISTING SYSTEM AND SYSTEM REPAIR EVALUATION

Revised

PERMIT # _____

APPLICANT: Alachua County Housing Authority

CONTRACTOR / AGENT: Jeff Harder

LOT: 1 BLOCK: — SUBDIV: Thistle Hills West ID#: 05081-001-000

TO BE COMPLETED BY FLORIDA REGISTERED ENGINEER, DEPARTMENT EMPLOYEE, SEPTIC TANK CONTRACTOR OR OTHER CERTIFIED PERSON. SIGN AND SEAL ALL SUBMITTED DOCUMENTS. COMPLETE ALL APPLICABLE ITEMS. COMPLETE TANK CERTIFICATION BELOW OR NOTE IN REMARKS WHY THE TANKS CANNOT BE CERTIFIED.

EXISTING TANK INFORMATION				
<u>750</u>	GALLONS SEPTIC TANK/GPD ATU	LEGEND: _____	MATERIAL: _____	BAFFLED: [Y / N]
<u>750</u>	GALLONS SEPTIC TANK/GPD ATU	LEGEND: _____	MATERIAL: _____	BAFFLED: [Y / N]
	GALLONS GREASE INTERCEPTOR	LEGEND: _____	MATERIAL: _____	
	GALLONS DOSING TANK	LEGEND: _____	MATERIAL: _____	# PUMPS: []

cracked not certifiable see Biltz Report

CERTIFY THAT THE LISTED TANKS WERE PUMPED ON / / BY , HAVE THE VOLUMES SPECIFIED AS DETERMINED BY [DIMENSIONS / FILLING / LEGEND], ARE FREE OF OBSERVABLE EFFECTS OR LEAKS, AND HAVE A [SOLIDS DEFLECTION DEVICE / OUTLET FILTER DEVICE] INSTALLED.

SIGNATURE OF LICENSED CONTRACTOR	BUSINESS NAME	DATE
----------------------------------	---------------	------

EXISTING DRAINFIELD INFORMATION * old permit shows 200 & 400 GPD found 15 x 15
400 10-860-923 total 600 GPD
200] SQUARE FEET PRIMARY DRAINFIELD SYSTEM NO. OF TRENCHES [1] DIMENSIONS: 15 x 15
200] SQUARE FEET _____ SYSTEM NO. OF TRENCHES [] DIMENSIONS: 10 x 20
TYPE OF SYSTEM: [X] STANDARD [] FILLED [] MOUND []
CONFIGURATION: [] TRENCH [X] BED []
DESIGN: [] HEADER [X] D-BOX [X] GRAVITY SYSTEM [] DOSED SYSTEM
ELEVATION OF BOTTOM OF DRAINFIELD IN RELATION TO EXISTING GRADE 40 INCHES [ABOVE / BELOW]

SYSTEM FAILURE AND REPAIR INFORMATION
1972 10-860-92] SYSTEM INSTALLATION DATE TYPE OF WASTE [X] DOMESTIC [] COMMERCIAL
400] GPD ESTIMATED SEWAGE FLOW BASED ON [] METERED WATER [X] TABLE 1, 64E-6, FAC
SITE [] DRAINAGE STRUCTURES [] POOL [] PATIO / DECK [] PARKING
CONDITIONS: [] SLOPING PROPERTY [X] tree
NATURE OF [] HYDRAULIC OVERLOAD [] SOILS [] MAINTENANCE [] SYSTEM DAMAGE
FAILURE: [] DRAINAGE / RUN OFF [X] ROOTS [] WATER TABLE [not age]
FAILURE [] SEWAGE ON GROUND [X] TANK [] D BOX/HEADER [X] DRAINFIELD
SYMPTOM: [X] PLUMBING BACKUP []

MARKS/ADDITIONAL CRITERIA Per pump info & old permit there are 2 tanks found 1 tank
Permit # 10-860-92 combine flows to one new tank & DE

EMITTED BY: Jeff Harder TITLE/LICENSE 1A-100 DATE: 12-12-19
4015, 08/09 (Obsoletes previous editions which may not be used)
incorporated 64E-6.001, FAC



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT #. _____

Ransom

APPLICANT: Alachua County Housing Authority AGENT: Jeff Hardee

LOT: 1 BLOCK: --- SUBDIVISION: Thrtle Hills West

PROPERTY ID #: 05081-001-000 [Section/Township/Parcel No. or Tax ID Number]

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: ☒ YES ☐ NO NET USABLE AREA AVAILABLE: .15 ACRES
ESTIMATED SEWAGE FLOW: 400 GALLONS PER DAY [RESIDENCES-TABLE 1/OTHER-TABLE2]
AUTHORIZED SEWAGE FLOW: 375 GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
OBSTRUCTED AREA AVAILABLE: 1000 SQFT UNOBSTRUCTED AREA REQUIRED: 900 SQFT

BENCHMARK/REFERENCE POINT LOCATION: Nail in Big Oak SW of ST
ELEVATION OF PROPOSED SYSTEM SITE IS 20 [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES
POTABLE WATER: NA FT DITCHES/SWALES: NA 15 FT NORMALLY WET? ☐ YES ☒ NO
POLLUTANTS: PUBLIC: NA FT LIMITED USE: NA FT PRIVATE: NA FT NON-POTABLE: NA FT
BUILDING FOUNDATIONS: 6 FT PROPERTY LINES: 5 FT POTABLE WATER LINES: 30 FT

IS THE SUBJECT TO FREQUENT FLOODING: ☐ YES ☒ NO 10 YEAR FLOODING? ☐ YES ☒ NO
YEAR FLOOD ELEVATION FOR SITE: NA FT MSL/NGVD SITE ELEVATION: NA FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1 20" Below

MUNSELL #/COLOR	TEXTURE	DEPTH
10YR 4-2	FS	0 TO 24
10YR 4-3	FS	24 TO 30
10YR 5-3	FS	30 TO 44
10YR 7-3	FS	44 TO 56
10YR 5-4	SL	56 TO 72
		TO
		TO
		TO
10YR 5-6	CMY DIRT LF	36 TO 56

SDA SOIL SERIES: Six mill huffer

SOIL PROFILE INFORMATION SITE 2 20" Below

MUNSELL #/COLOR	TEXTURE	DEPTH
10YR 4-2	FS	0 TO 6
10YR 4-3	FS	6 TO 24
10YR 5-3	FS	24 TO 38
10YR 5-4	SL	38 TO 72
		TO
		TO
		TO
10YR 5-6	CMY DIRT LF	36 TO 38

USDA SOIL SERIES: Six mill huffer

PERMANENT WATER TABLE: 72 INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: PERCHED [PERCHED / APPARENT]
SATURATED WET SEASON WATER TABLE ELEVATION: 36 INCHES [ABOVE / BELOW] EXISTING GRADE
WATER TABLE VEGETATION: ☐ YES ☒ NO MOTTILING: ☒ YES ☐ NO DEPTH: 36 INCHES

TEXTURE/LOADING RATE FOR SYSTEM SIZING: FS, B Table 14 DEPTH OF EXCAVATION: NA INCHES
FIELD CONFIGURATION: ☒ TRENCH ☐ BED ☐ OTHER (SPECIFY) _____

REMARKS/ADDITIONAL CRITERIA: Initial 300' of main line
old Permit shows 600' DE Eastall one new Tank to replace
the 2 existing 750' EST. + Eastall 600' DE

EVALUATED BY: Jeff Hardee DATE: 12-12-19



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

01-003-19
PERMIT #: 01-SA-2026866
APPLICATION #: AP1459812
DATE PAID: _____
FEE PAID: _____
RECEIPT #: _____
DOCUMENT #: PR1287203

CONSTRUCTION PERMIT FOR: OSTDS Repair
APPLICANT: (Alachua County Housing Authority)
PROPERTY ADDRESS: 17094 SW 41 St Archer, FL 32618
LOT: 1 BLOCK: 2/A SUBDIVISION: Thistle Hills West
PROPERTY ID #: 05081-001-000 [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 New Septic CAPACITY
A [~~1,000~~] GALLONS / GPD CAPACITY
N [0] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK:1250 GALLONS]
K [300] GALLONS DOSING TANK CAPACITY [67.00] GALLONS @ [6] DOSES PER 24 HRS #Pumps [1]
D [600] SQUARE FEET Drainfield Replacement SYSTEM
R [] SQUARE FEET SYSTEM
A TYPE SYSTEM: [x] STANDARD [] FILLED [] MOUND []
I CONFIGURATION: [x] TRENCH [] BED []

N
F LOCATION OF BENCHMARK: nail in big Oak SW of septic tank
I ELEVATION OF PROPOSED SYSTEM SITE [20.00] [INCHES] FT [] ABOVE [] BELOW [] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [50.00] [INCHES] FT [] ABOVE [] BELOW [] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [0.00] INCHES EXCAVATION REQUIRED: [] INCHES

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. Performing Lift Dosing if needed as permitted drainfield elevation is 10" shallower than existing elevation. Pumps must be certified as suitable for distributing sewage effluent. Both existing septic tanks to be properly abandoned and inspected. Remove all existing drainfield from proposed area and properly dispose with spoil. Combine split plumbing into a new shared OSTDS per agent. Private site evaluation shall be confirmed at time of installation inspection.

SPECIFICATIONS BY: Jeff W Hardee TITLE: CEHP
APPROVED BY: Todd S Harris TITLE: Assistant EH Director Alachua CHD
DATE ISSUED: 01/06/2020 EXPIRATION DATE: 04/05/2020
DH 4016, 08/09 (Obsoletes all previous editions which may not be used)
Incorporated: 64E-6.003, FAC

NOTICE OF RIGHTS

A party whose substantial interest is affected by this order may petition for an administrative hearing pursuant to sections 120.569 and 120.57, Florida Statutes. Such proceedings are governed by Rule 28-106, Florida Administrative Code. A petition for administrative hearing must be in writing and must be received by the Agency Clerk for the Department, within twenty-one (21) days from the receipt of this order. The address of the Agency Clerk is 4052 Bald Cypress Way, BIN A-02, Tallahassee, Florida 32399. The Agency Clerk's facsimile number is 850-413-8743.

Mediation is not available as an alternative remedy.

Your failure to submit a petition for hearing within 21 days from receipt of this order will constitute a waiver of your right to an administrative hearing, and this order shall become a "final order".

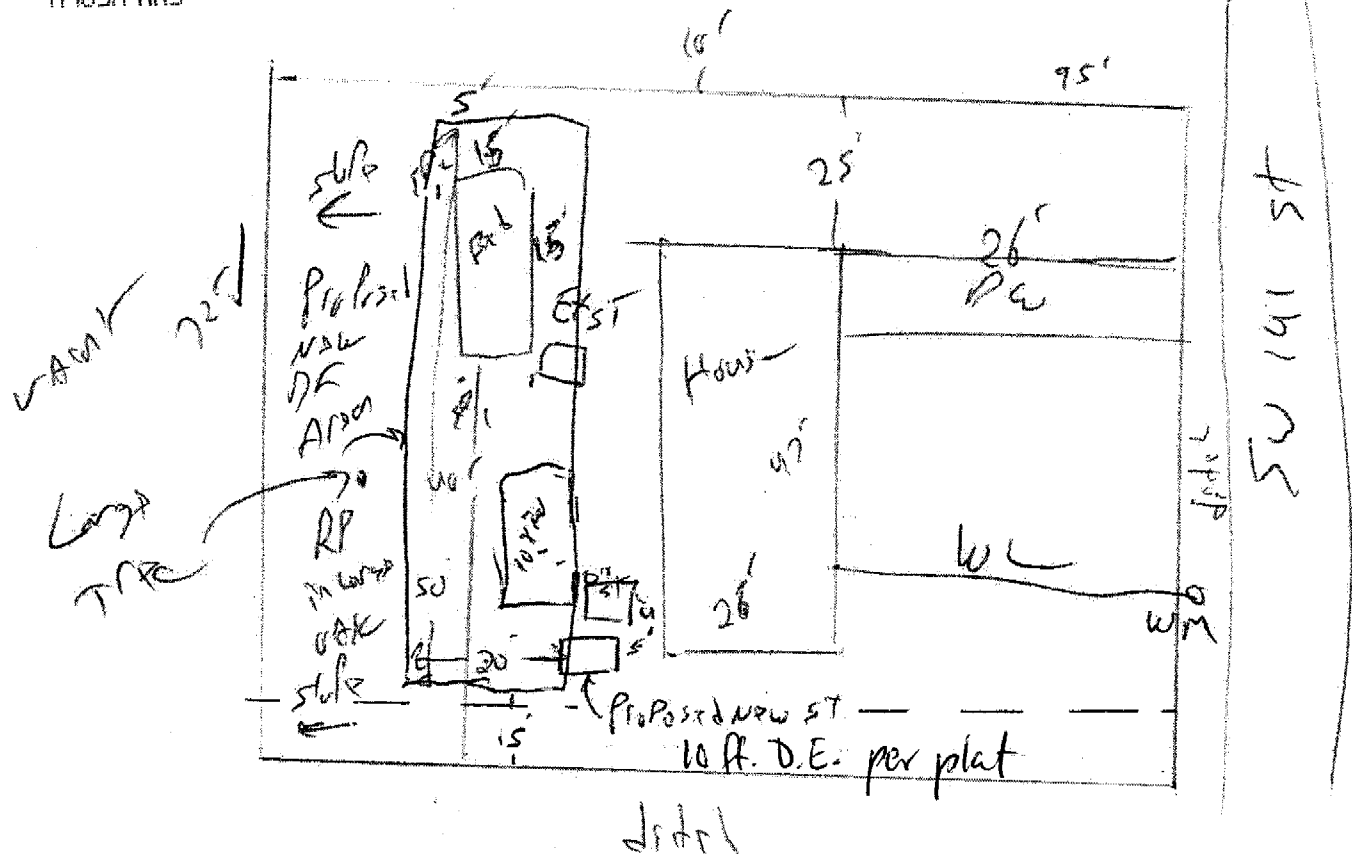
Should this order become a final order, a party who is adversely affected by it is entitled to judicial review pursuant to Section 120.68, Florida Statutes. Review proceedings are governed by the Florida Rules of Appellate Procedure. Such proceedings may be commenced by filing one copy of a Notice of Appeal with the Agency Clerk of the Department of Health and a second copy, accompanied by the filing fees required by law, with the Court of Appeal in the appropriate District Court. The notice must be filed within 30 days of rendition of the final order.

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Alachua County Housing Authority
PART II - S

PART II - SITEPLAN

Done



lot is 23' shorter in length than original plat BK H PG 28 due to a 23 ft strip on the North end of the subdivision that was claimed but not dedicated as R/W and was later vacated per Ordinance 280-92.

Date _____

By

County Health Department

DI-14015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 84E-8.001, FAC
(Stock Number: 5744-002-4015-8)

Harris, Todd S

From: Harris, Todd S
Sent: Thursday, January 2, 2020 10:32 AM
To: jeffhardeehep@aol.com
Cc: Cribbs, Tina L
Subject: RE: Aluchua county housing authority rsa

Thank you for this application; please provide the following information to complete the application for permitting:

- Add water lines to site plan
- Show the other system on the site plan
- Identify existing and proposed tanks and drainfields locations on the site plan
- With two systems both should be described on the 4015 and the proposed drainfield amount cannot be less than existing

Thank you ,

Todd Harris
Environmental Manager
Florida Department of Health in Alachua County
224 SE 24th St.
Gainesville, FL 32641
Office 352-334-7932
Fax 352-334-7935

Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure

From: jeffhardeehep@aol.com <jeffhardeehep@aol.com>
Sent: Wednesday, January 1, 2020 11:29 AM
To: Harris, Todd S <Todd.Harris@flhealth.gov>; Cribbs, Tina L <Tina.Cribbs@flhealth.gov>
Subject: Aluchua county housing authority rsa

Please see attached and charge card. Jeff

Parcel: 05081-001-000

Search Date: 11/19/2019 at 12:50:44 PM

Taxpayer:	ALACHUA COUNTY HOUSING AUTHORITY	Legal:	THISTLE HILLS WEST PB H-28 LOT 1 OR 804/ 350
Mailing:	701 NE 1ST ST GAINESVILLE, FL 32601		
Location:	17094 SW 141ST PL ARCHER		
Sec-Twn-Rng:	17-11-18		
Property Use:	08600 - CTY INC NONMUNI		
Tax Jurisdiction:	ARCHER - 2700		
Area:	CITY OF ARCHER		
Subdivision:	THISTLE HILLS WEST		

Year	Property Use	Land Value	Classified Land Value	Improvement Value	Total Just Value	Deferred Value	County Assessed	School Assessed	County Exempt	School Exempt	County Taxable	School Taxable
2019	CTY INC NONMUNI	8000	0	60236	68236	3226	65010	68236	65010	68236	0	0
2018	CTY INC NONMUNI	8000	0	51100	59100	0	59100	59100	59100	59100	0	0
2017	Cty Inc Nonmuni	8000	0	52200	60200	0	60200	60200	60200	60200	0	0
2016	Cty Inc Nonmuni	8000	0	48700	56700	0	56700	56700	56700	56700	0	0
2015	Cty Inc Nonmuni	8000	0	49600	57600	0	57600	57600	57600	57600	0	0
2014	Cty Inc Nonmuni	8000	0	49800	57800	0	57800	57800	57800	57800	0	0

Land

Land Use	Land Use Desc	Zoning Type	Zoning Desc	Lots	Acres	Sq Feet	Land Type
0100	SFR	R-2	LAND ZONE: R-2	1	0	1	UN

Improvements

Improvement Type	Improvement Desc	Actual Year Built	Effective Year Built	Htd Square Feet	Stories
0100	SINGLE FAMILY	1900	1972	1225	1

Improvement Details

Improvement Attributes

Imprv Detail Type	Description	SqFt/Unit	Quality	Qual Desc	Bldg Use	BUse Desc	Attribute	Attribute Desc	Units
BAS	BASE AREA	1225	3	Average	0100	SINGLE FAMILY	Bathrooms	1.5-Baths	1
FOP	FINISHED OPEN PORCH	80	3	Average	0100	SINGLE FAMILY	Bedrooms	4-4 BEDROOMS	1
							Exterior Wall	15-CONCRETE BLOCK	100
							Floor Cov	07-CORK TILE	100
							HC&V	03-FORCED - NO DT	100
							Heat System	03-GAS	100
							HVAC	03-CENTRAL	100
							Interior Wall	05-DRYWALL	100
							Num Res Units	Num Res Units	1
							Roof Type	03-GABLE/HIP	100
							Roofing	03-ASPHALT	100

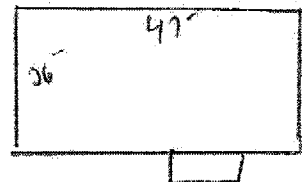
Improvements

Improvement Type	Improvement Desc	Actual Year Built	Effective Year Built	Htd Square Feet	Stories
SOHM	SOH MISC				

Improvement Details

Improvement Attributes

Imprv Detail Type	Description	SqFt/Unit	Quality	Qual Desc	Bldg Use	BUse Desc
3800	DRIVE/WALK	250			C1	COMM



THE CITY OF ARCHER, FLORIDA

RECORDED
OFFICIAL RECORDS

92 MAY -7 PM 3:21

ORDINANCE: 280 - 92

BEFORE THE CITY COUNCIL

CLERK OF CIRCUIT
COUNTY COURT
ALACHUA COUNTY, FL.

AN ORDINANCE CLOSING, VACATING, AND ABANDONING ANY INTEREST OF THE CITY OF ARCHER IN AND TO THAT STRIP OF LAND TWENTY-THREE FEET WIDE, LYING NORTHERLY AND ADJACENT TO THE NORTH LINE OF "THISTLE HILLS - WEST", A SUBDIVISION AS PER PLAT RECORDED IN PLAT BOOK "H", PAGE 28 OF THE PUBLIC RECORDS OF ALACHUA COUNTY, FLORIDA.

WHEREAS, that portion of public right of way as described in Section 1 of this ordinance is not being used for public right-of-way purposes by the City of Archer, and

WHEREAS, there does not appear to have been formal dedication of the property described in Section 1 to the City of Archer for public easement or road right-of-way purposes, and

WHEREAS, Betty Sanders, an owner of the property described in Section 1 below, has applied to the City of Archer to vacate and abandon the right-of-way to resolve any issue over possible public claim of ownership, and

WHEREAS, time is of the essence to the applicant as she has immediate plans to convey and/or mortgage the property or a portion of it, and

WHEREAS, the City Council of the City of Archer has determined that this creates a bona fide emergency in accordance with the requirements for enactment of an emergency ordinance under Florida Statute Ch. 166.041.

NOW THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF ARCHER, FLORIDA:

Section 1. The following described property, to the extent that the City of Archer may have any easement or platted right-of-way interest, is hereby closed, vacated, and abandoned as a public right-of-way of the City of Archer:

A strip of land, 23 feet wide, lying northerly of and adjacent to the north line of "Thistle Hills - West", a subdivision as per plat thereof, recorded in Plat Book "H", page 28 of the Public Records of Alachua County, Florida, lying easterly of the west line of the east 1/2 of the northeast 1/4 of the southeast 1/4 of the southeast 1/4 of Section 17, Township 11 South, Range 18 east, Alachua County, Florida, and lying westerly of the west right of way line of Gibson Avenue; all lying and being in a portion of said east 1/2 of the northeast 1/4 of the southeast 1/4 of the southeast 1/4, City of Archer, Alachua County, Florida.

1132531

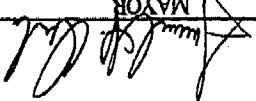
O.R. 1856 PG2105
BK

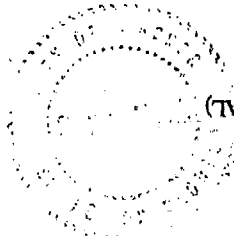
Section 2. This ordinance is enacted as an emergency ordinance in accordance with the requirements of Florida Statute Ch. 166.041 and shall take effect on the date of its passage on second and final reading.

First Reading Date: April 27, 1992.

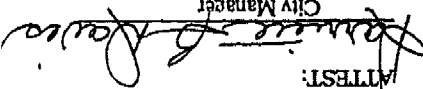
Second Reading Date: April 27, 1992.

This ordinance is passed this 27 day of April, 1992.


MAYOR



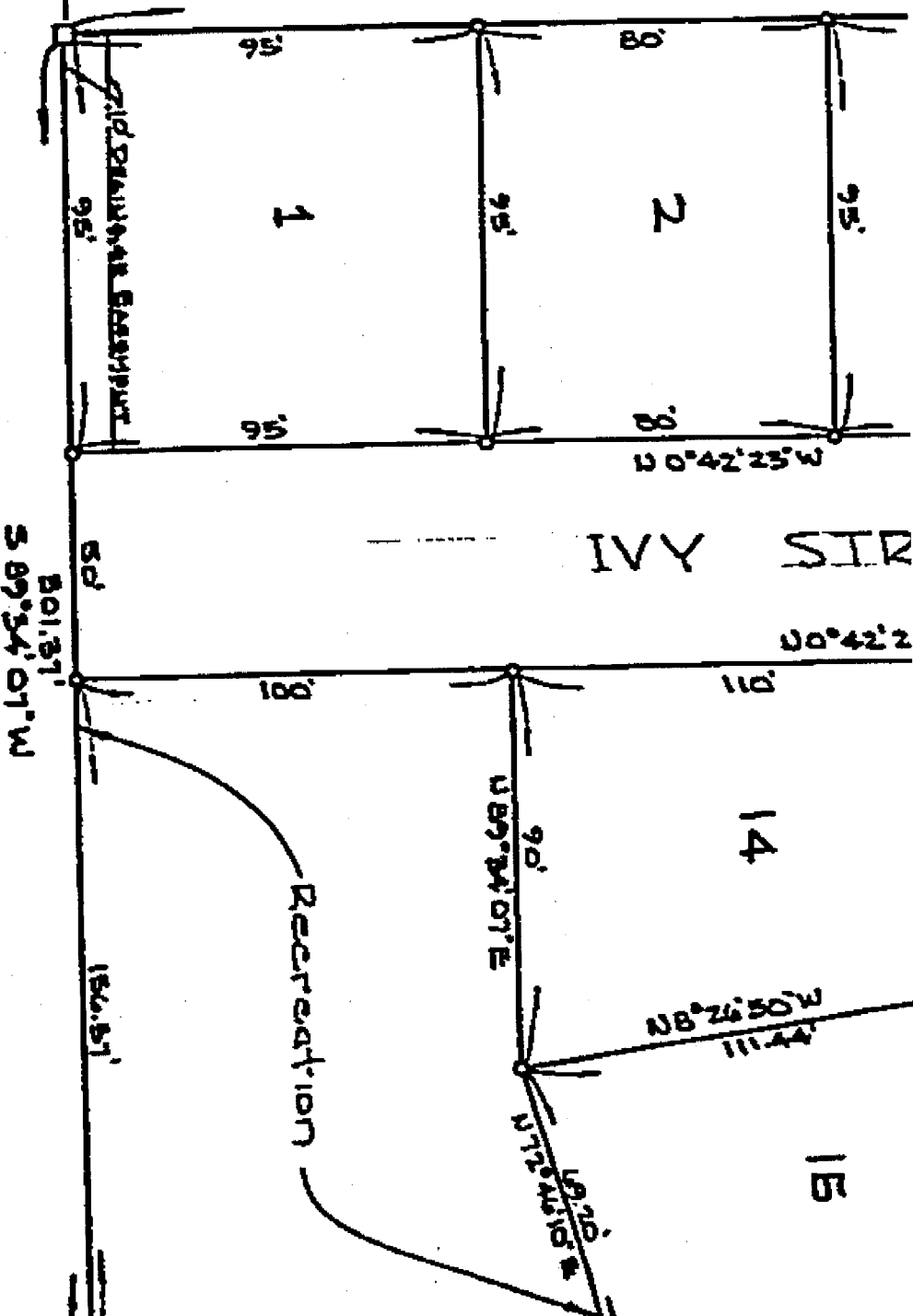
(SEAL)

ATTEST:

City Manager

This instrument prepared by:
Gary D. Grunder,
City Attorney

BK 1856 PG 2106

South line
Sec. 11. T11S. R18E



CURVE DATA

CURVE	CHORD	INTERSECT. A.	CHORD BEARING	CHORD DISTANCE
1	220'	S 3° 55' 21\"	N 60° 46' 46\" E	120.86'
2	50'	S 0° 50' 53\"	N 0° 22' 10\" E	25.75'
3	50'	S 5° 00' 00\"	S 51° 03' 14\" E	67.56'
4	50'	S 5° 51' 48\"	N 92° 21' 50\" E	74.29'
5	50'	S 9° 11' 19\"	S 60° 06' 44\" E	70.21'

Thistle Hills West

Unit # 1

17094 SW 141st Place

4 Bedroom

05081-001-000

The north tank on this home was covered in a layer of water when we arrived at this inspection. As we dug the tank up water came pouring out of the septic tank as can be seen in picture 1. The level in the tank was so high it actually pushed the lid up and away from the tank itself when we got it completely uncovered. In picture 2 the watery layer can be seen pouring out around the edge of the tank. As we pumped the tank down it became very evident that there was a large amount of water coming out of the house. Fortunately, the resident of the house was home at the time, and we were able to determine that she was not using water at the time. This means there is a large-scale leak allowing water to come in the septic system at all times, regardless of whether water is being used. Typically, those kinds of leaks come from leaking toilets. The tank had an incredible amount of grease and baby wipes in it as well. Additionally, there was a very bad grease clog both in the inlet pipe and in the inlet cone of the tank. The clog in the inlet cone can be seen in picture 3. The contents of this tank had the appearance of being long overdue for pumping but according to the resident the tank had been pumped twice in the last 4 years while she lived there, which would make it seem there is most certainly some very heavy usage. Picture 4 is interesting because it shows the outlet side of the tank with baby wipes on top of the outlet cone, but it looks "washed" compared to other pictures of tanks with waste on top of the inlet or outlet. This can be explained by the excessive running water coming into the tank, washing the cone and lid and giving it a different appearance. No test of the drain field was

performed on this tank because obviously it was already severely overloaded and without a doubt would have failed. The tank itself is structurally sound and certifiable.

The south septic tank on this house serves one bathroom only. The level in the tank was at normal level when we opened up indicating that the drain field is working. We did notice, however, that there was running water coming into this tank when it wasn't being used according to the resident. There was a very thick layer of sludge at the bottom of the tank and the tank was full of baby wipes and trash (as can be seen in pictures 1 and 2) and thus was very much in need of pumping. The drain field was tested by running water for 12 minutes and showed no signs of backing up. It can be stated that this drain field is working at this time but is likely near the end of its life.

Additionally, there is a large V-shaped crack in the wall of this septic tank as seen in picture 3 so it would not be certifiable for reuse.

According to health department records 400 square feet of drain field was installed on the north septic tank and 200 square feet on the south septic tank in 1993 according to permit # 10-860-92.

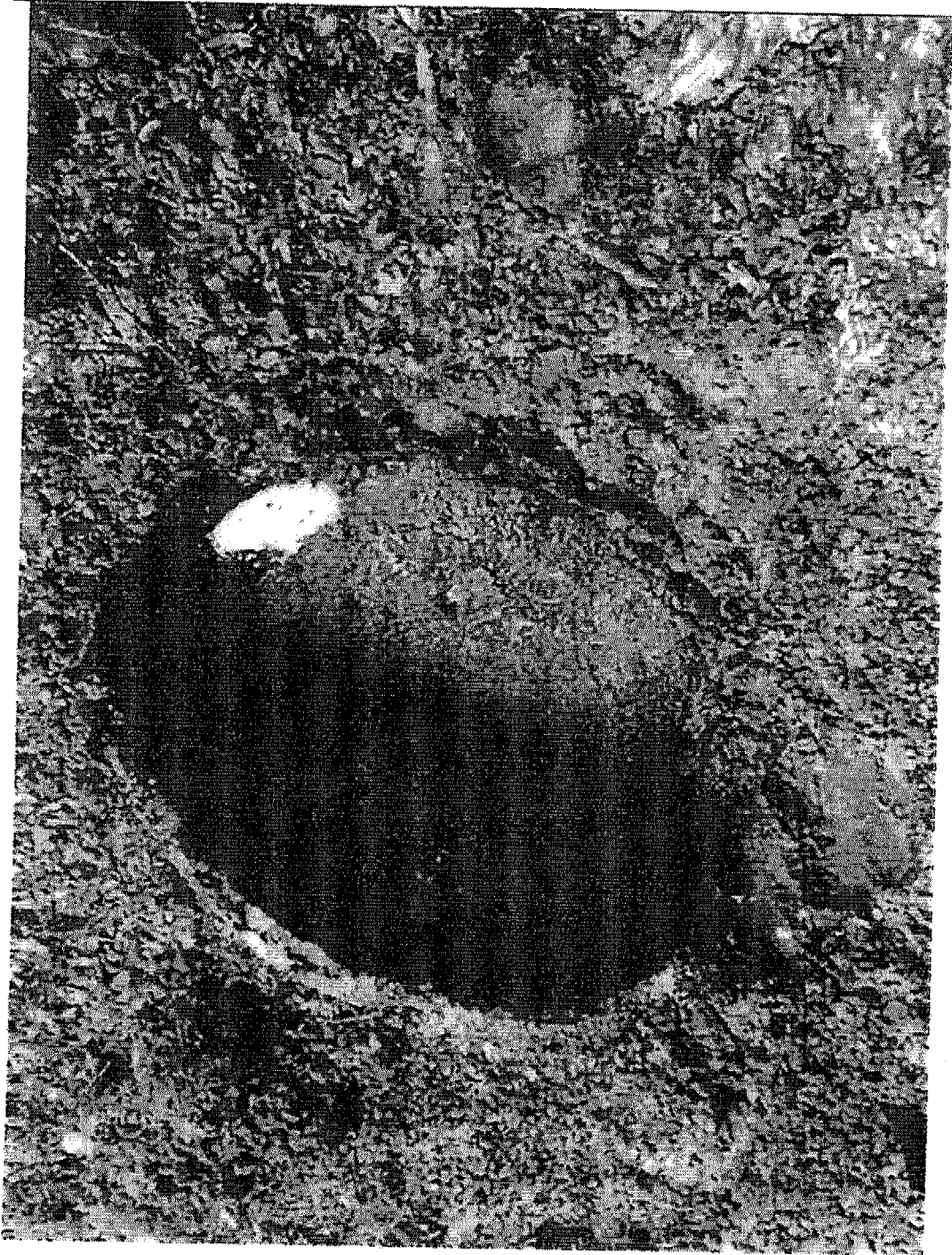
It is safe to presume that in the next 5-10 years both septic systems at this house will need to be replaced. Hydraulic, such as what was occurring with the north septic tank at the time of inspection, normally shortens the life of a drain field and that drain field is already at the end of its life statistically. The drain field on the south septic system is also at the end of its life statistically speaking. Considering that the south septic tank is not certifiable, I would recommend combining the whole house into one new septic system when the time comes. The approximate cost for that work would be \$5400 - \$6600.

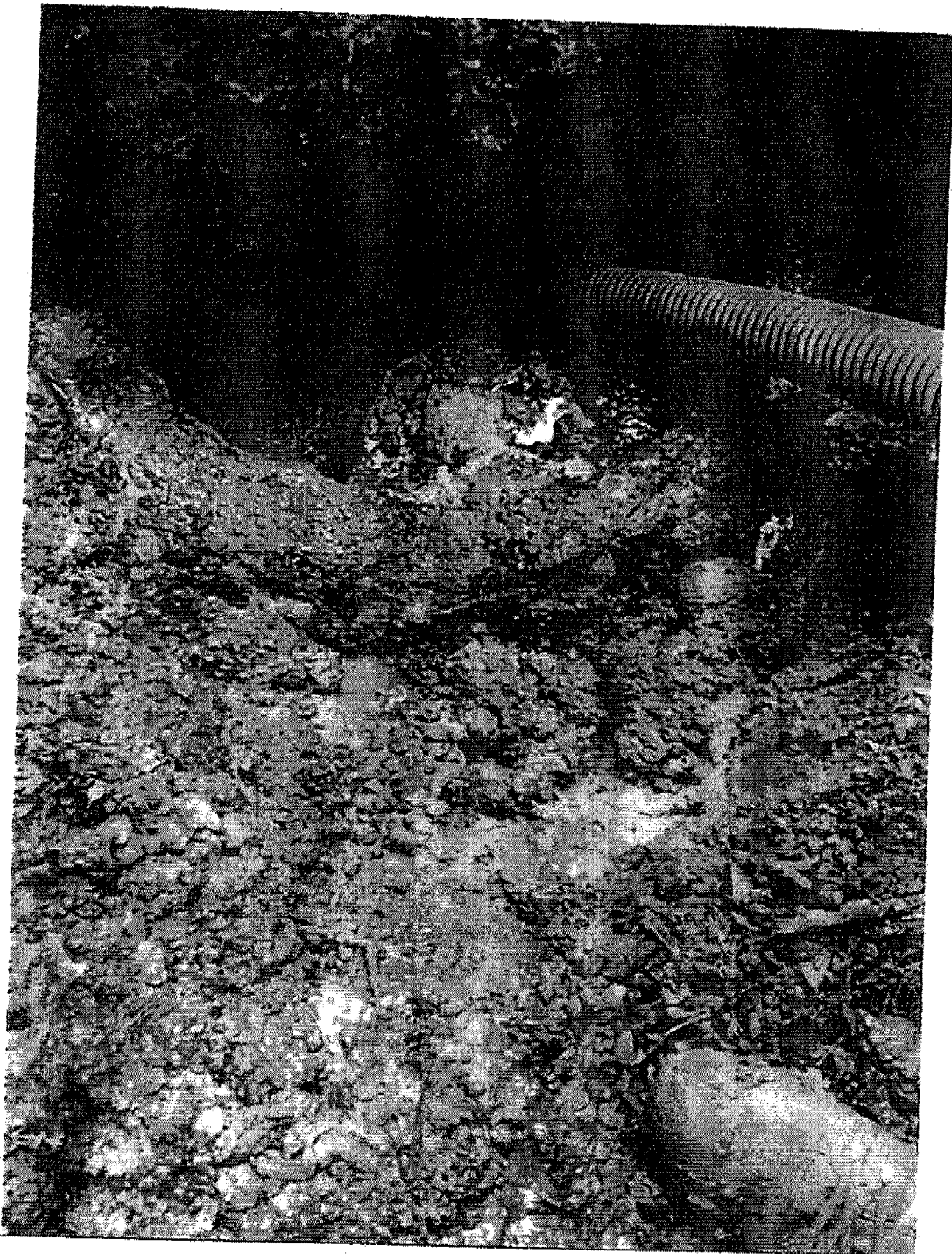


Thistle Hills West Unit 1 North Tank

Picture 1

Thistle Hills West Unit 1 North Tank
Picture 2

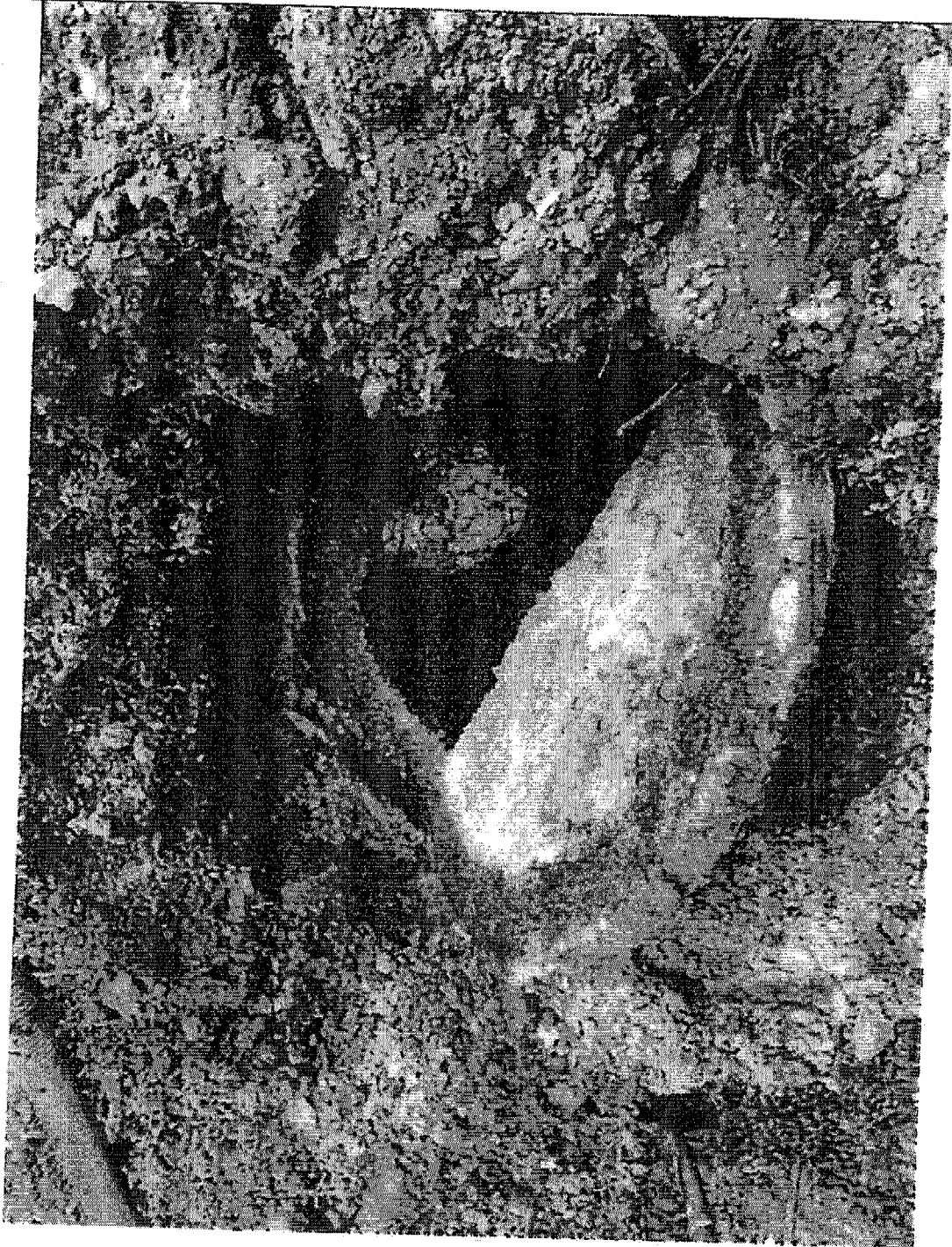




Thistle Hills West Unit 1 North Tank

Picture 3

Thistle Hills West Unit 1 North Tank
Picture 4



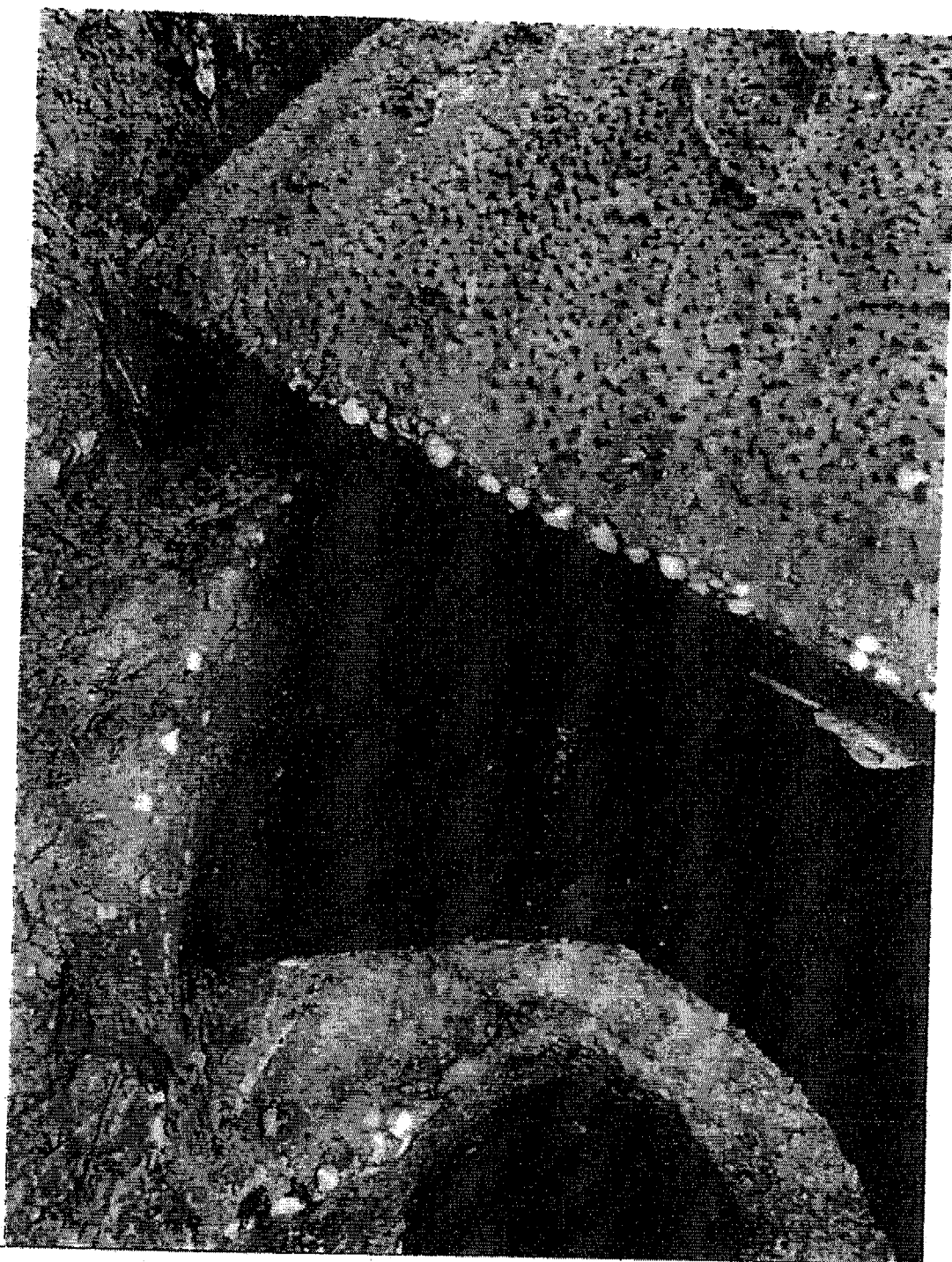


Thistle Hills West Unit 1 South Tank

Picture 1

Thistle Hills West Unit 1 South Tank
Picture 2





Thistle Hills West Unit 1 South Tank

Picture 3

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM
CONSTRUCTION PERMIT

Authority: Chapter 381, F.S. & Chapter 10D-6, F.A.C.

Building Permit #:

Application/Permit Number 10860920

Date Application Received 10/26/92

Fee Amount Paid _____

Receipt # _____

Date Paid _____

Application Is For:

New System: _____ Repair: ☒ Existing System: _____ Experimental System (Temporary): _____

Tank Abandonment: _____ Holding Tank: _____ Other (Specify): _____

NOTE: PERMITS EXPIRE ONE YEAR FROM THE DATE OF ISSUANCE AND ARE NOT RENEWABLE. REPAIR PERMITS AND HOLDING TANK PERMITS EXPIRE 90 DAYS FROM DATE OF ISSUANCE. APPROVAL OF A SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR A SPECIFIC PERIOD OF TIME.

TO BE COMPLETED BY APPLICANT:

GENERAL INFORMATION

Owner: Alachua County Housing Authority Telephone: (Work) 372-2549 (Home) 120

Owner's Mailing Address: 636 NE 1st Street City: Gainesville State: FL Zip: 32601

Owner's Agent: SAME JOHN HANSEN Telephone: (W) _____ (H) _____

Agent's Mailing Address: _____ City: _____ State: _____ Zip: _____

Property Street Address: 110 Thistle Hills West (Archer)

Exact Directions to Property: Highway 24 to Archer, left at red light to Church Street.

Take right at Church Street to 4 way stop. Left at stop. Project on right, 1/2 mile.

Lot # 1 Block # _____ Subdivision: Thistle Hills West Unit: _____ Date Subdivided: 1971

Section: 17 Township: 11 Range: 18 Parcel Number: 5081-Lot Zoning Designation: _____

Property size: _____ Square Feet/Acres Water Supply: Private: _____ Public: _____ Limited Use: _____

Is Sanitary Sewer Available: Yes _____ No _____ If No, approximate the distance to the sewer line closest to your property: _____

Is Public Water Available: Yes _____ No _____ If No, approximate the distance to the water line closest to your property: _____

BUILDING INFORMATION

Type of Establishment # Of Units Building Area (Square Feet) # Of Persons # Of Seats Hours of Operation
Commercial/Residential (circle one) & Number of Bedrooms

SFD

1000 (4)

Plumbing Fixtures: Garbage Grinders/Disposals: _____ Spas/Hot Tubs: _____ Floor/Equipment Drains: _____
Ultra-low volume Flush Toilets: _____ Other: _____

BUILDING PLANS MUST BE ATTACHED SHOWING OFFICES, BEDROOMS, TOTAL BUILDING AREA, AND ANY PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, F.A.C. IN ADDITION, A DETAILED SITE PLAN AND/OR SURVEY, DRAWN TO SCALE, MUST BE ATTACHED SHOWING PROPER DIMENSIONS, BUILDING LOCATIONS, AND PERTINENT FEATURES REQUIRED TO BE SUBMITTED PER CHAPTER 10D-6.040, F.A.C.

Applicant's Signature: Ch. F. O'H Date: 10/26/92

SITE EVALUATION & SYSTEM SPECIFICATIONS

Permit is For: New System ☐ Repair ☒ Existing System ☐ Experimental System(Temporary) ☐ Other(specify) ☐

Application/Permit Number 10-860-92R

TO BE COMPLETED BY ENGINEER, HEALTH UNIT EMPLOYEES, OR OTHER QUALIFIED PERSONS. SYSTEM IS TO BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS SET FORTH IN CHAPTER 10D-6, F.A.C.

SITE AND SOIL EVALUATION

The Elevation of proposed system site is: 2 inches above/below (circle one) the benchmark/reference point location.
 Benchmark/Reference Point Location: BACKDOOR PATIO 20' S Elevation: Assumed ☒ Actual ☐
 Setback to Surface Waters: NA Ft.
 Setback to Ditches/Swales from System Site: 15 Ft. Ditches/Swales contiguous to property normally: Wet ☐ Dry ☒
 Is the site subject to frequent flooding? Yes ☐ No ☒ Is site subject to 10 Year flooding? Yes ☐ No ☒
 If subject, what is 10 year flood elevation for site: NA Ft. MSL/NGVD Site Elevation: NA Ft. MSL/NGVD
 Setback to wells from system site: Public ☐ Ft. Limited Use ☐ Ft. Private NA Ft. Non-potable ☐ Ft.

SOIL PROFILE INFORMATION SITE #1

MUNSELL # & COLOR	TEXTURE	DEPTH
5/2 GB	FS	0 to
6/4 LTB	FS	
7/3 VTB	FS	
6/6 BY-RD	SL	30

SOIL PROFILE INFORMATION SITE #2

MUNSELL # & COLOR	TEXTURE	DEPTH
		0 to

USDA Soil Series Name: SIMILAR TO ARLEDOON # 3 MAP 95 USDA Soil Series Name: SAME # SAME
 Observed Water Table at the time of the evaluation is: > 72 above/below (circle one) existing grade
 Estimated Wet Season Water Table is: > 54 above/below (circle one) existing grade
 Type water table: Perched ☐ Apparent ☒ Is soil Mottled? Yes ☐ No ☒ At What Depth: NA
 Are the Vegetative species on site indicative of high wet season water table? Yes ☐ No ☒ Type: NA
 Site evaluated by: O. Chasky Title: EHS Date: 11/9/92

SYSTEM SPECIFICATIONS

Property size (net usable area): ~.2 Square Feet/Acres
 Total Estimated Sewage Flow: Table I 450 GPD
 Design Sewage Flow from Table II 600 GPD
 Loading Rate: 1.0 Gallons/Square Foot/Day
 Disposal system configuration: Trench: ☒ Bed: ☒ Other(describe):
 Absorption area required: 600 Square Feet
 Excavation Required: Yes ☐ No ☒ Minimum Depth of Excavation: 1 Ft. Area Excavated: 1200 Ft. X 1 Ft.
 Unobstructed area required: 1200 Square Feet
 Unobstructed area available: ~1000 Square Feet
 Additional construction criteria: NO SANITARY NUISANCE OBSERVED

Design by: O. Chasky Title: EHS
 If designed by a P.E., provide registration number: _____ Place your seal upon the appropriate plans and attachments
 Specifications Approved by: O. Chasky Title: EHS Date: 11/9/92 AL CPUH

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
PERMIT FOR CONSTRUCTION OF AN ONSITE SEWAGE DISPOSAL SYSTEM

Authority: Chapter 381, F.S. & Chapter 10D-6, F.A.C.

Application/Permit Number 10-860-92R

Permit is for:

New System: _____ Repair: ☒ Existing System: _____ Experimental System (Temporary): _____

Tank Abandonment: _____ Holding Tank: _____ Other (Specify): _____

GENERAL INFORMATION

Owner: AL CO. HOUSING AUTHORITY Telephone: (Work) 372-2549 (Home) _____

Property Street Address: 110 THISTLE HILLS WEST

Lot #: 1 Block #: NA Subdivision: 11 Unit: NA

Section: 17 Township: 11 Range: 18 Parcel Number: 5081

TO BE COMPLETED BY ENGINEER OR COUNTY PUBLICHEALTH UNIT EMPLOYEES ONLY. SYSTEM IS TO BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS SET FORTH IN CHAPTER 10D-6, F.A.C. PERMITS EXPIRE ONE YEAR FROM THE DATE OF ISSUANCE AND ARE NOT RENEWABLE. REPAIR PERMITS AND HOLDING TANK PERMITS EXPIRE 90 DAYS FROM DATE OF ISSUANCE. APPROVAL OF A SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME.

SYSTEM DESIGN AND SPECIFICATIONS

Design Sewage Flow from Table II 600 GPD Most Restrictive Soil Texture Used for System Sizing: SL
Loading Rate: 1.0 Gallons/Square Foot/Day Standard: ☒ Filled: _____ Mound: _____ Other: _____
Disposal system configuration: Trench: _____ Bed: ☒ Other(describe): _____
Minimum absorption area required: 600 Square Feet
Bottom of drainfield absorption area must be 232 inches above/below (circle one) benchmark/fixed point of reference.
Is Fill required? Yes _____ No ☒ If Yes, What is the Minimum Height of Fill Required: _____ Inches/Feet
Excavation Required: Yes _____ No ☒ Minimum Depth of Excavation: _____ Ft. Area Excavated: _____ Square Feet
Unobstructed area required: 1200 Square Feet Unobstructed area available: ~1000 Square Feet
Septic tank liquid capacity: EXISTING gallons..... Minimum Drainfield Area Required: 600 Square Feet
Laundry tank liquid capacity: _____ gallons..... Minimum Drainfield Area Required: _____ Square Feet
Gray water tank liquid capacity: _____ gallons..... Minimum Drainfield Area Required: _____ Square Feet
Aerobic treatment unit treatment capacity: _____ gpd..... Drainfield Area Required: _____ Square Feet
Grease interceptor capacity: _____ gallons Dosing Tank: Capacity/Volume per Dose (circle one): _____ gallons
Holding Tank Capacity (must be sufficient to handle all waste generated over a seven day period): _____ gallons
Additional construction criteria: DB INVERT 12-24" BELOW NG/14-26" BELOW RP

Design by: _____ Title: _____

If designed by a P.E., provide registration number: _____ Place your seal upon the appropriate plans and attachments.

TO BE COMPLETED BY HEALTH UNIT:

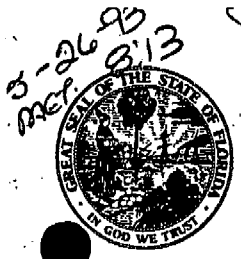
Application Received: 10, 26 92 Reviewed by: Q Chokry Title: EHS Date: 11/9/92 AL CPUH

Incomplete: _____ Disapproved: _____ Date: 1/1 Reason: _____

Disapproved: _____ Date: 1/1 Reason: _____

Approved: ☒ By: Q Chokry CPUH Date: 11, 9, 92

Date Issued: 11, 9, 92 Date of Expiration: 2, 9, 93 Amount of Fee Paid: 0



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
CONSTRUCTION INSPECTION AND FINAL APPROVAL
Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT # 10-860-922
RECEIPT # N/A
FEE PAID \$ N/A
DATE PAID 10/26/92

5 at 200 5-27-93

APPLICANT: Alachua Cty Housing Authority AGENT:

PROPERTY STREET ADDRESS: 110 THISTLE HILLS WEST

LOT: 1 BLOCK: SUBDIVISION: THISTLE HILLS WEST

PROPERTY ID #: 5081-1 [SECTION/TOWNSHIP/RANGE/PARCEL NUMBER]
[OR TAX ID NUMBER]

CHECKED [X] ITEMS ARE NOT IN COMPLIANCE WITH CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

- | | |
|--|--|
| TANK INSTALLATION | SETBACKS |
| [] [01] TANK SIZE [1] <u>EX</u> [2] _____ | [] [27] SURFACE WATER |
| [] [02] TANK MATERIAL <u>N/A</u> | [] [28] DITCHES |
| [] [03] OUTLET DEVICE _____ | [] [29] PRIVATE WELLS |
| [] [04] MULTI-CHAMBERS _____ | [] [30] PUBLIC WELLS |
| [] [05] LEGEND <u>N/A</u> | [] [31] IRRIGATION WELLS |
| [] [06] WATERTIGHT _____ | [] [32] POTABLE WATER LINES |
| [] [07] LEVEL _____ | [] [33] BUILDING FOUNDATION |
| [] [08] DEPTH OF LID _____ | [] [34] PROPERTY LINES |
| | [] [35] OTHER _____ |
| DRAINFIELD INSTALLATION | FILLED/MOUND SYSTEM |
| [] [09] AREA [1] <u>See</u> [2] <u>Below</u> SQFT | [] [36] DRAINFIELD COVER |
| [] [10] DISTRIBUTION BOX/HEADER _____ | [] [37] SHOULDERS |
| [] [11] NUMBER OF DRAINLINES _____ | [] [38] SLOPES |
| [] [12] DRAINLINE SEPARATION _____ | [] [39] STABILIZATION MATERIAL _____ |
| [] [13] DRAINLINE SLOPE _____ | |
| [] [14] DEPTH OF COVER _____ | ADDITIONAL INFORMATION |
| [] [15] SYSTEM ELEVATION <u>D.B. INU 320' BRP</u> | [] [40] UNOBSTRUCTED AREA |
| [] [16] SYSTEM LOCATION _____ | [] [41] STORMWATER RUNOFF |
| [] [17] DOSING PUMPS <u>N/A</u> | [] [42] ALARMS |
| [] [18] AGGREGATE SIZE _____ | [] [43] MAINTENANCE AGREEMENT |
| [] [19] AGGREGATE SOURCE _____ | [] [44] BUILDING AREA |
| [] [20] AGGREGATE WASHED _____ | [] [45] PLUMBING FIXTURES |
| [] [21] AGGREGATE DEPTH _____ | [] [46] FINAL SITE GRADING |
| FILL/EXCAVATION MATERIAL | [] [47] CONTRACTOR <u>MYERS</u> |
| [] [22] FILL AMOUNT _____ | [] [48] OTHER _____ |
| [] [23] FILL TEXTURE _____ | |
| [] [24] EXCAVATION DEPTH <u>N/A</u> | ABANDONMENT |
| [] [25] EXCAVATION AREA _____ | [] [49] TANK PUMPED _____ |
| [] [26] REPLACEMENT MATERIAL _____ | [] [50] TANK CRUSHED AND FILLED _____ |

EXPLANATION OF VIOLATIONS:
[] 800 FT² → 12a (MASTER BR) ≥ 600 FT² TOTAL.
[] 400 FT² → 12a + 12b
[]
[]

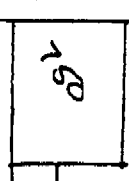
CONSTRUCTION (APPROVED/DISAPPROVED): Paul S. Myers ANACHUA CPHU DATE: 5/27/93
FINAL SYSTEM (APPROVED/DISAPPROVED): Paul S. Myers ANACHUA CPHU DATE: 5/27/93

8'0" RUN FOR SEPTIC DRAIN FIELD PEDIACE.

3/1/92
DSE

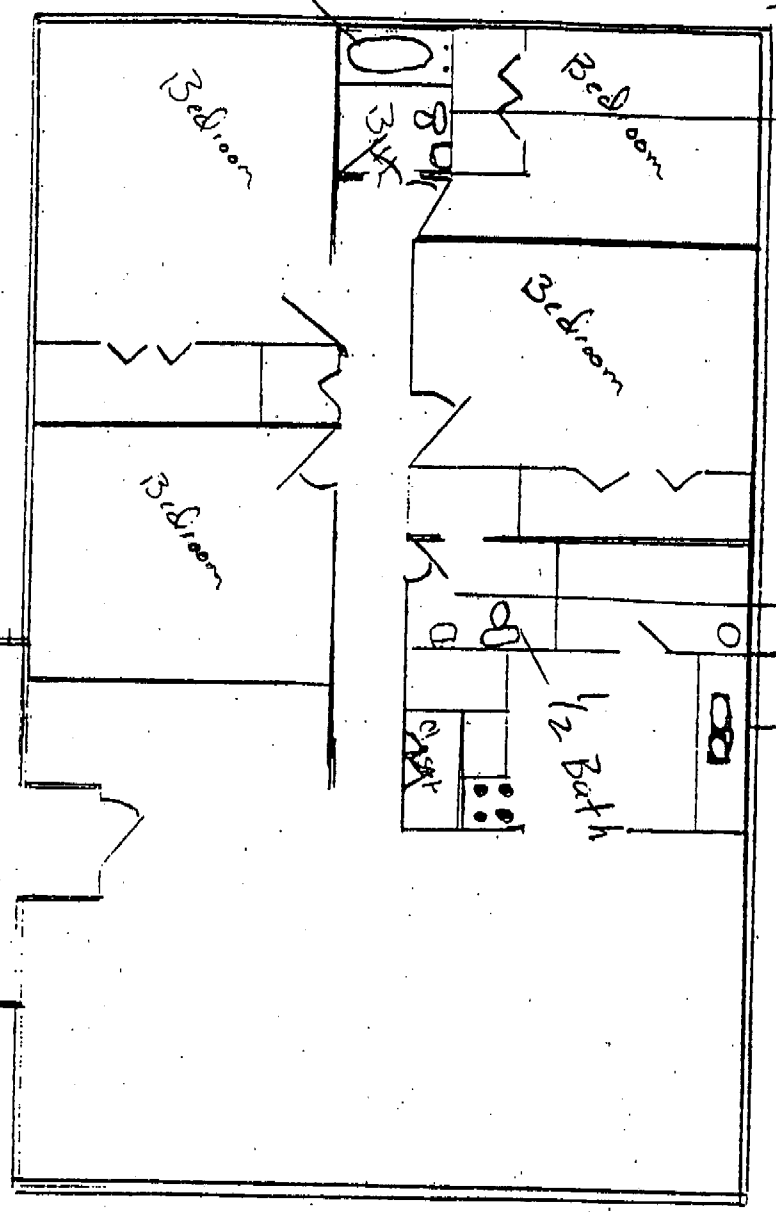


#2
Master Bath



#1
Kitchen 1/2 Bath

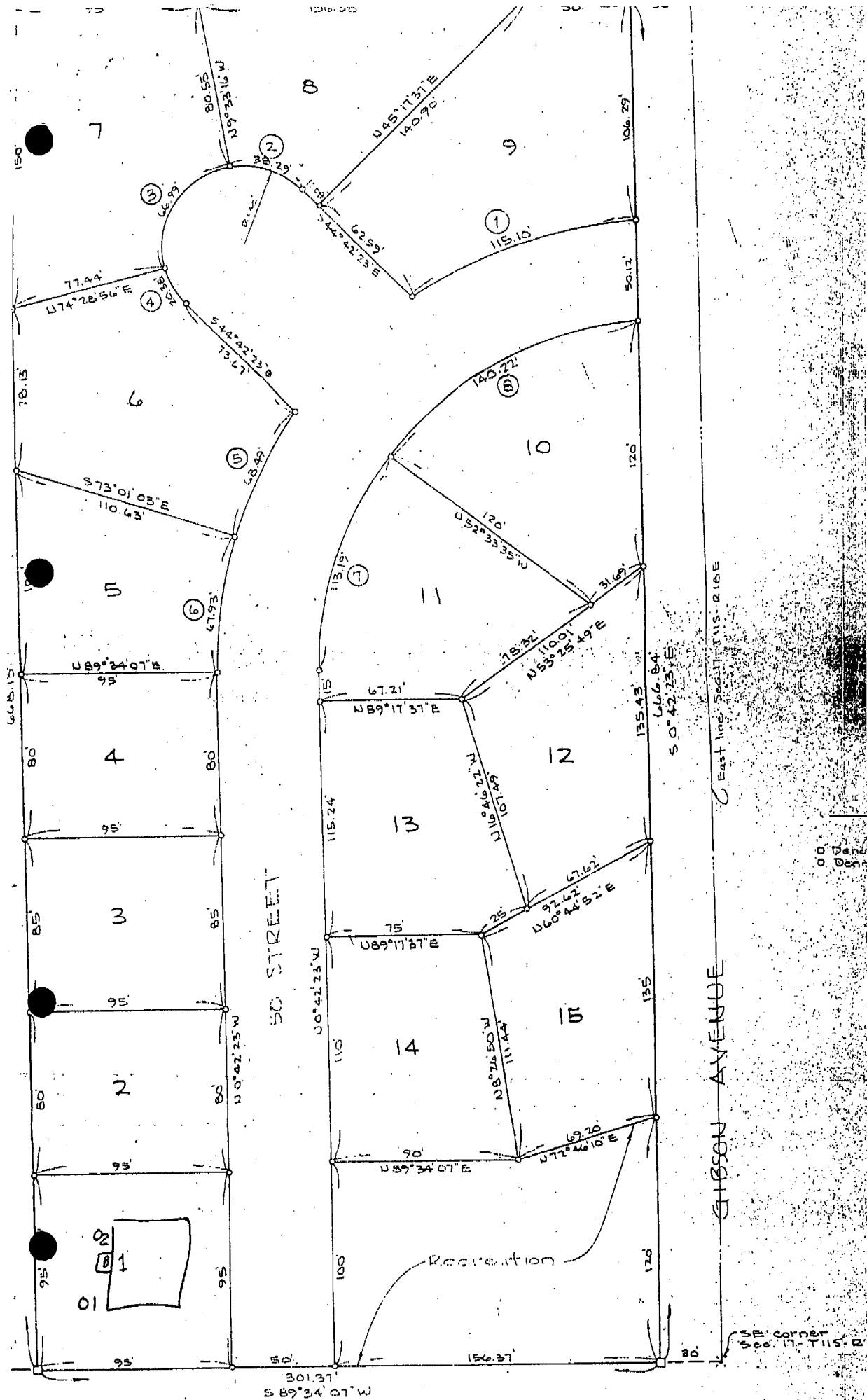
Upward



4 Bedroom *

* Four and Five Bedroom
bathrooms in same
locations: one full bath,
one half bath. All of these
units have two tanks.

Street





STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
EXISTING SYSTEM AND SYSTEM REPAIR EVALUATION

PERMIT # 21-003-29

APPLICANT: Alachua County Housing Authority

CONTRACTOR / AGENT: Jeff Hardee

LOT: 1 BLOCK: — SUBDIV: Thistle Hills West ID#: 05081-001-000

TO BE COMPLETED BY FLORIDA REGISTERED ENGINEER, DEPARTMENT EMPLOYEE, SEPTIC TANK CONTRACTOR OR OTHER CERTIFIED PERSON. SIGN AND SEAL ALL SUBMITTED DOCUMENTS. COMPLETE ALL APPLICABLE ITEMS. COMPLETE TANK CERTIFICATION BELOW OR NOTE IN REMARKS WHY THE TANKS CANNOT BE CERTIFIED.

EXISTING TANK INFORMATION

Cracked. Not certifiable see Rpt 2 Report

<u>900</u>	GALLONS SEPTIC TANK/GPD ATU	LEGEND:	MATERIAL:	BAFFLED: [Y / N]
	GALLONS SEPTIC TANK/GPD ATU	LEGEND:	MATERIAL:	BAFFLED: [Y / N]
	GALLONS GREASE INTERCEPTOR	LEGEND:	MATERIAL:	
	GALLONS DOSING TANK	LEGEND:	MATERIAL:	# PUMPS: []

CERTIFY THAT THE LISTED TANKS WERE PUMPED ON 1 / 1 / BY —, HAVE THE VOLUMES SPECIFIED AS DETERMINED BY [DIMENSIONS / FILLING / LEGEND], ARE FREE OF OBSERVABLE EFFECTS OR LEAKS, AND HAVE A [SOLIDS DEFLECTION DEVICE / OUTLET FILTER DEVICE] INSTALLED.

SIGNATURE OF LICENSED CONTRACTOR BUSINESS NAME DATE

EXISTING DRAINFIELD INFORMATION

225 SQUARE FEET PRIMARY DRAINFIELD SYSTEM NO. OF TRENCHES [1] DIMENSIONS: 15 x 15
[] SQUARE FEET SYSTEM NO. OF TRENCHES [] DIMENSIONS: — x —

TYPE OF SYSTEM: [X] STANDARD [] FILLED [] MOUND []

CONFIGURATION: [] TRENCH [X] BED []

DESIGN: [] HEADER [X] D-BOX [X] GRAVITY SYSTEM [] DOSED SYSTEM

ELEVATION OF BOTTOM OF DRAINFIELD IN RELATION TO EXISTING GRADE 40 INCHES [ABOVE / BELOW]

SYSTEM FAILURE AND REPAIR INFORMATION

1972 SYSTEM INSTALLATION DATE TYPE OF WASTE [X] DOMESTIC [] COMMERCIAL
400 GPD ESTIMATED SEWAGE FLOW BASED ON [] METERED WATER [X] TABLE 1, 64E-6, FAC

CONDITIONS: [] DRAINAGE STRUCTURES [] POOL [] PATIO / DECK [] PARKING
[] SLOPING PROPERTY [X] POOR

FAILURE OF [] HYDRAULIC OVERLOAD [X] SOILS [] MAINTENANCE [] SYSTEM DAMAGE
[] DRAINAGE / RUN OFF [X] ROOTS [] WATER TABLE [X] Age

FAILURE [] SEWAGE ON GROUND [] TANK [] D BOX/HEADER [X] DRAINFIELD
SYMPTOM: [X] PLUMBING BACKUP []

REMARKS/ADDITIONAL CRITERIA Per Pump Rpt 2 old Report there are 2 tanks found 1 tank
Permit # 10-860-92 combine flow to one new tank & PE

SUBMITTED BY: Jeff Hardee TITLE/LICENSE 19-100 DATE: 12/20/19

14015, 08/09 (Obsoletes previous editions which may not be used)

incorporated 64E-6.001, FAC



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT #. 01-003-20

APPLICANT: Alachua County Housing Authority AGENT: Jeff Hardee
T: 1 BLOCK: --- SUBDIVISION: Thistle Hills West
PROPERTY ID #: 05081-001-000 [Section/Township/Parcel No. or Tax ID Number]

BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: ☒ YES ☐ NO NET USABLE AREA AVAILABLE: 15 ACRES
TOTAL ESTIMATED SEWAGE FLOW: 400 GALLONS PER DAY [RESIDENCES-TABLE 1/OTHER-TABLE 2]
AUTHORIZED SEWAGE FLOW: 375 GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
OBSTRUCTED AREA AVAILABLE: 300 SQFT UNOBSTRUCTED AREA REQUIRED: 450 SQFT

BENCHMARK/REFERENCE POINT LOCATION: Nail in Big Oak SW of ST
ELEVATION OF PROPOSED SYSTEM SITE IS 20 [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINT

MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES
FACE WATER: N4 FT DITCHES/SWALES: 40 FT NORMALLY WET? ☐ YES ☒ NO
LINES: PUBLIC: N4 FT LIMITED USE: N4 FT PRIVATE: N4 FT NON-POTABLE: N4 FT
BUILDING FOUNDATIONS: 6 FT PROPERTY LINES: 5 FT POTABLE WATER LINES: 10 FT

IS SUBJECT TO FREQUENT FLOODING: ☐ YES ☒ NO 10 YEAR FLOODING? ☐ YES ☒ NO
YEAR FLOOD ELEVATION FOR SITE: N4 FT MSL/NGVD SITE ELEVATION: N4 FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1 20" Below

MUNSELL #/COLOR	TEXTURE	DEPTH
10YR 4-2	FS	0 TO 24
10YR 4-3	FS	24 TO 36
10YR 5-3	FS	30 TO 44
10YR 7-3	A	44 TO 56
10YR 5-4	CL	56 TO 72
		TO
		TO
		TO
10YR 5-6	cmu dist RP	36 TO 56
USDA SOIL SERIES: <u>S. m. m. h. p. p.</u>		

SOIL PROFILE INFORMATION SITE 2 20" Below

MUNSELL #/COLOR	TEXTURE	DEPTH
10YR 4-2	FS	0 TO 6
10YR 4-3	FS	6 TO 24
10YR 5-3	FS	24 TO 38
10YR 5-4	CL	38 TO 72
		TO
		TO
		TO
		TO
10YR 5-6	cmu dist RP	36 TO 58
USDA SOIL SERIES: <u>S. m. m. h. p. p.</u>		

PERVED WATER TABLE: 72 INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: [PERCHED / APPARENT]
SATURATED WET SEASON WATER TABLE ELEVATION: 36 INCHES [ABOVE / BELOW] EXISTING GRADE
WATER TABLE VEGETATION: ☐ YES ☒ NO MOTTLING: ☒ YES ☐ NO DEPTH: 36 INCHES
TEXTURE/LOADING RATE FOR SYSTEM SIZING: FS, B table 14 DEPTH OF EXCAVATION: N4 INCHES
FIELD CONFIGURATION: ☒ TRENCH ☐ BED ☐ OTHER (SPECIFY) _____
REMARKS/ADDITIONAL CRITERIA: Install 30" Ø OF minimum

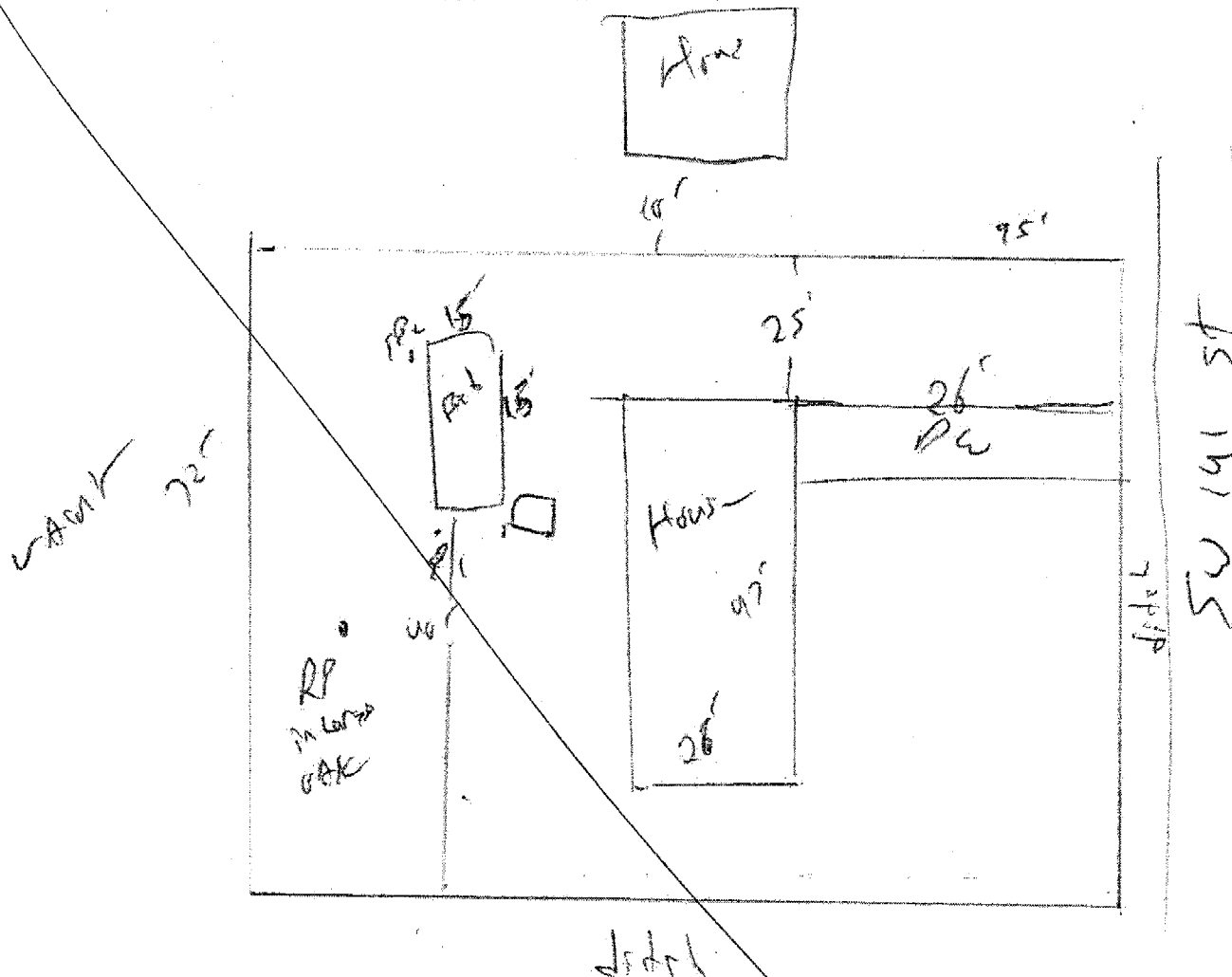
EVALUATED BY: Jeff Hardee DATE: 12-12-19

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 06-003-20

Alachua County Housing Authority

PART II - SITEPLAN



Notes: _____

Site Plan submitted by: J. Miller

Plan Approved: _____ Not Approved: X

By: Dale Jones Date: 1/2/20

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT