

OPERATING PERMIT

For: OC700 - Operating and Commercial,
Issued To: Carol's Place
 42313 Hwy 19
 Alafia, FL 33702

Billing ID: 35-80-1191783
 Permit Number: 35-QT-60096
 County: 35 - Lake
 Issue Date: 09/30/2020
 Permit Expires On: 10/31/2021

The facility shown above has been inspected by a duly authorized representative of the Department of Health, and was found in conformance with those rules promulgated by the department under the authority of Chapters 381, 386 and 405 Part II, Florida Statutes, and set forth in Rule 64C-6, Florida Administrative Code.

This permit grants authority to operate the above referenced facility, service, or system in conformance with department rules and the conditions of operation shown below. This permit is revocable, upon service of notice, when it is determined by the department that the operational conditions and department standards are not being maintained.

Issued by: Lake County Health Department
 19001 19th St., Tavares, FL 32780

DO NOT DETACH HERE
 DO NOT SEPARATE FROM OPERATING PERMIT

CONDITIONS OF OPERATION

For: OC700 - Operating and Commercial,
Issued To: Carol's Place
 42313 Hwy 19
 Alafia, FL 33702

Billing ID: 35-80-1191783
 Permit Number: 35-QT-60096
 Permit Expires On: 10/31/2021

The operating permit for the facility shown above has been issued with the following conditions of operation:

(35-811-0001) DISPLAY OPERATING PERMIT AND CONDITIONS OF OPERATION IN A CONSPICUOUS PLACE
 DETACH HERE - RETAIN THIS PORTION FOR YOUR RECORDS

RECEIPT

For: OC700 - Operating and Commercial,
Issued To: Carol's Place
 42313 Hwy 19
 Alafia, FL 33702

Billing ID: 35-80-1191783
 Permit Number: 35-QT-60096
 County: 35 - Lake
 Issue Date: 09/30/2020
 Amount Paid: 100.00
 Date Paid: 10/28/2020
 Check Number: 2887
 Receipt Number: 35-PD-1191111
 Operator ID: R089MCA

OPERATING PERMIT

For: OC700 - Operating and Industrial Manufacturing Zone,
Issued To: America One
 15525 Old Mill Hwy
 Tavares, FL 32780

Billing ID: 35-80-1307191
 Permit Number: 35-QT-60097
 County: 35 - Lake
 Issue Date: 05/04/2021
 Permit Expires On: 07/31/2021

The facility shown above has been inspected by a duly authorized representative of the Department of Health, and was found in conformance with those rules promulgated by the department under the authority of Chapters 381, 386 and 405 Part II, Florida Statutes, and set forth in Rule 64C-6, Florida Administrative Code.

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Issued by: Lake County Health Department
 19001 19th St., Tavares, FL 32780

DO NOT DETACH HERE
 DO NOT SEPARATE FROM OPERATING PERMIT

CONDITIONS OF OPERATION

For: OC700 - Operating and Industrial Manufacturing Zone,
Issued To: America One
 15525 Old Mill Hwy
 Tavares, FL 32780

Billing ID: 35-80-1307191
 Permit Number: 35-QT-60097
 Permit Expires On: 07/31/2021

The operating permit for the facility shown above has been issued with the following conditions of operation:

(35-811-0001) DISPLAY OPERATING PERMIT AND CONDITIONS OF OPERATION IN A CONSPICUOUS PLACE
 DETACH HERE - RETAIN THIS PORTION FOR YOUR RECORDS

RECEIPT

For: OC700 - Operating and Industrial Manufacturing Zone,
Issued To: America One, Inc.
 15525 Old Mill Hwy
 Tavares, FL 32780

Billing ID: 35-80-1307191
 Permit Number: 35-QT-60097
 County: 35 - Lake
 Issue Date: 05/04/2021
 Amount Paid: 100.00
 Date Paid: 06/02/2021
 Check Number: 24909
 Receipt Number: 35-PD-1439024
 Operator ID: C0769HJLR



B - 10:15 - 10:30
Conventional Systems and Commercial / IM
Zone Operating Permits



Conventional Systems Requiring Commercial or I/M Zone Operating Permits

- Wastewater Treatment Standards for Conventional Systems
- Operating Permit Requirements for Commercial Wastewater Treatment Systems and I/M Zones.
- Annual Operating Permit System Inspections
- Maintenance Entities
- System Maintenance Requirements

Wastewater Treatment Standards for Conventional Systems

- ▶ **Conventional system treatment in I/M and Commercial Wastewater Situations:**
 - Levels of treatment that can be achieved by a conventional baseline system.
 - What can and cannot be permitted by the DOH to use a conventional baseline system for wastewater treatment.

Wastewater Treatment Standards for Conventional Systems

- ▶ **Conventional system treatment in I/M and Commercial Wastewater Situations :**
 - Levels of treatment that can be achieved by a conventional baseline system.
 - **What can and cannot be permitted by the DOH to use a conventional baseline system for wastewater treatment.**

Wastewater Treatment Standards:

POLLUTANT	BASELINE SYSTEM STANDARDS Septic tank effluent	BASELINE SYSTEM STANDARDS @ base of 24 inch unsaturated zone	AEROBIC TREATMENT UNIT (effluent)	SECONDARY TREATMENT STANDARDS (effluent)	ADVANCED SECONDARY TREATMENT STANDARDS (effluent)	ADVANCED WASTEWATER TREATMENT STANDARDS (effluent)
CBOD ₅ (Carbonaceous Biochemical Oxygen Demand)	120-240 mg/l	< 5 mg/l	=or< 25 mg/l	=or< 20 mg/l	=or< 10 mg/l	=or< 5 mg/l
TSS (Total Suspended Solids)	65-176 mg/l	< 5 mg/l	=or< 30 mg/l	=or< 20 mg/l	=or< 10 mg/l	=or< 5 mg/l
TN (Total Nitrogen)	36-45 mg/l	15-25 mg/l	not applicable	not applicable	=or< 20 mg/l	=or< 3 mg/l
TP (Total Phosphorus)	6-10 mg/l	< 5 mg/l	not applicable	not applicable	=or< 10 mg/l	=or< 1 mg/l
Fecal coliform		undetected	not applicable	=or< 200 fc col/100 ml	=or<200 fc col/100 ml	BDL for 100 ml
DRAINFIELD REDUCTIONS	not applicable	not applicable	25% in slightly limited soil	25%	40%	40%
REDUCE: SETBACKS surface water groundwater drains dry retention & swales SEPARATIONS to SHWT	no change no change no change no change	no change no change no change no change	no change no change no change no change	65 ft no change no change no change	50 ft 10 ft 10 ft no change	25 ft 10 ft 10 ft 12 in
INCREASE AUTHORIZED FLOWS	no change	no change	no change	25%	50%	100%

Wastewater Treatment Standards for Conventional Systems

- ▶ Conventional system treatment in I/M and Commercial Wastewater Situations :
 - Levels of treatment that can be achieved by a conventional baseline system.
 - What can and cannot be permitted by the DOH to use a conventional baseline system for wastewater treatment.

What can and cannot be permitted to use a DOH-regulated conventional baseline wastewater treatment system?

- This is outlined by Florida Statutes:
 - Chapter 381, FS.
 - Chapter 386, FS.
- It is further described by rule:
 - Rule 64E-6, FAC.
- ...and has been further clarified by:
 - The DOH-DEP Interagency agreement of September 10, 2001.

REFERENCED POLICIES AND PROCEDURES	
CONTINUING EDUCATION COURSES AND PROVIDERS - SEPTEMBER 2006	72
VOLUNTARY INSPECTION AND ASSESSMENT OF EXISTING SYSTEMS - MAY 2000	75
DRAINFIELD SIZING IN AREAS WITH DISCONTINUOUS LIMESTONE - AUGUST 1999	77
APPROVAL STANDARDS FOR OSTDS OUTLET FILTER DEVICES - NOVEMBER 2008	81
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CHAPTER 381.0064, F.S. CONTINUING EDUCATION COURSES FOR PERSONS INSTALLING OR SERVICING SEPTIC TANKS	88
CHAPTER 381.0065, F.S. ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEMS; REGULATION	88
CHAPTER 381.00655, F.S. CONNECTION OF EXISTING OSTDS TO CENTRAL SEWERAGE SYSTEM; REQUIREMENTS	99
CHAPTER 381.0066, F.S. ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEMS; FEES	100
CHAPTER 381.0067, F.S. CORRECTIVE ORDERS	101
CHAPTER 381.0068, F.S. TECHNICAL REVIEW AND ADVISORY PANEL	101
CHAPTER 386.01, F.S. SANITARY NUISANCES	103
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CHAPTER 386.041, F.S. NUISANCES INJURIOUS TO HEALTH	104
CHAPTER 386.051, F.S. NUISANCES INJURIOUS TO HEALTH, PENALTY	104

STATE OF FLORIDA DEPARTMENT OF HEALTH CHAPTER 64E-6 FLORIDA ADMINISTRATIVE CODE STANDARDS FOR ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEMS EFFECTIVE APRIL 18, 2010	
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64E-6.001 GENERAL	1
64E-6.002 DEFINITIONS	2
64E-6.003 PERMITS	7
64E-6.004 APPLICATION FOR SYSTEM CONSTRUCTION PERMIT	9
64E-6.005 LOCATION AND INSTALLATION	11
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64E-6.009 ALTERNATIVE SYSTEMS	18
64E-6.010 SEPTAGE AND FOOD ESTABLISHMENT SLUDGE	23
64E-6.0101 PORTABLE RESTROOMS AND PORTABLE OR STATIONARY HOLDING TANKS	27
64E-6.011 ABANDONMENT OF SYSTEMS	31
64E-6.012 MAINTENANCE OF AERobic TREATMENT UNITS CONSTRUCTION MATERIALS AND STANDARDS FOR TREATMENT RECEIPIANGLES	33
64E-6.014 CONSTRUCTION STANDARDS FOR DRAINFIELD SYSTEMS	42
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64E-6.017 DEFINITIONS	53
64E-6.018 SYSTEM LOCATION, DESIGN AND MAINTENANCE CRITERIA	54
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64E-6.029 MONITORING	69
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INTERAGENCY AGREEMENT

BETWEEN

THE DEPARTMENT OF ENVIRONMENTAL PROTECTION

AND

THE DEPARTMENT OF HEALTH

FOR

ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEMS

September 10, 2001



What can and cannot be permitted to use a DOH-regulated conventional baseline wastewater treatment system?

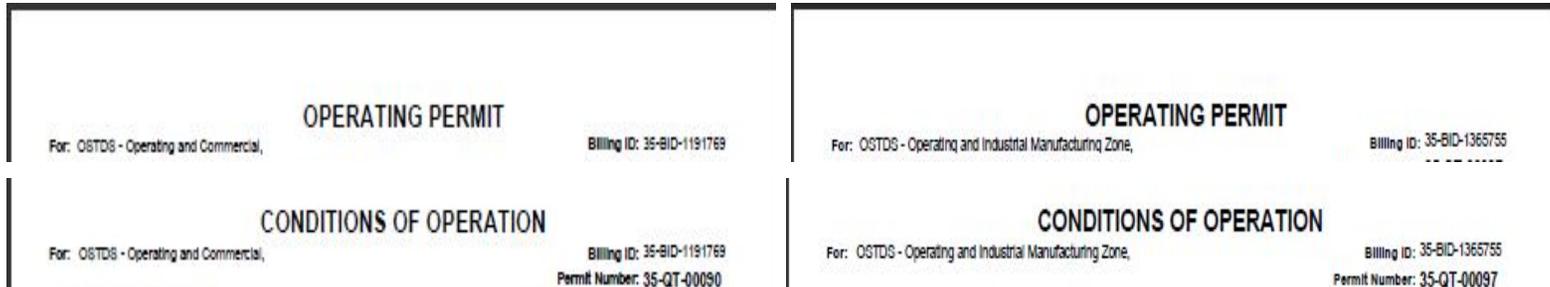
- In summary, the rules and statutes specify that the DOH regulates systems treating domestic and commercial wastewater within certain flow limits. (5,000gpd Commercial and 10,000gpd domestic)
- The DOH-DEP Interagency agreement further defines each agency's role where:
 - Wastewater strength exceeds that expected of the average domestic wastewater.
 - Wastewater is generated in an Industrial or Manufacturing area.
 - Toxic, hazardous, or Industrial wastewater is generated.
 - Wastewater from watercraft is removed at a marina.

Where commercial wastewater is generated, or any wastewater is generated within an Industrial or Manufacturing area, an annual Operating Permit is required per 64E-6.003(5), FAC and 381.0065(4)(i)2.



Based on these documents and regulations:

- Where commercial wastewater is generated, or any wastewater is generated within an Industrial or Manufacturing area, an annual Operating Permit is required per 64E-6.003(5), FAC and 381.0065(4)(i)2.
- What if it is suspected that non-DOH regulated wastewater might enter the OSTDS?
 - Where appropriate, sampling can be required as a condition of operation – the details and frequency of the sampling are to be determined by the County Health Department.



By statute, these permits are valid for 1 (one) year, at the end of which, they must be applied for again: they are not renewed.

Based on these documents and regulations:

- Exempted from these requirements are systems that were in use prior to:
 - July 1, 1998 for systems that would require a Commercial Operating Permit (Memo 98-039).
 - July 5, 1989 for systems that would require an I/M Operating Permit [381.0065(4)(i)2].
- This exemption is only valid for as long as the original owner, system, and use remains unchanged. Examples of items that void this exemption are:
 - Change in ownership.
 - Change in tenancy.
 - Change in estimated sewage flow.
 - New system installation.
 - System expansion or addition.
 - System repair.
 - Change in wastewater characteristics.
 - Change in wastewater strength.
 - Change in original permit conditions.

Commercial and I/M Operating Permits are applied for on forms:

- DH4081 – Application for Onsite Sewage Treatment and Disposal System Operating Permit...and...
- DH4081A – Business Survey
- These forms:
 - Document the proposed operating conditions.
 - Must be amended prior to changes in operating conditions.
 - Are filled out each year, and reviewed for compliance with the original system approval.
 - Must be submitted with fees before an OSTDS receives final approval.
 - Must be reviewed and approved by the County Health Department annually prior to Issuing the Operating Permit.

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

Authority: Chapter 381, F.S. & Chapter 64E-6, F.A.C. Application/Permit Number: _____
 New: _____ Amend: _____
 Aerobic: _____ Col: _____

Property Owner: _____
 Work Telephone: _____
 Address of Owner: _____
 Owner's Agent: _____
 Agent's Address: _____
 Agent's Phone: _____
 City: _____
 Section: _____ Town: _____

Please complete the above referenced Septic Tank(s)/Aer Drainfield size is _____
 The drainfield layout _____
 Onsite Well? Yes _____
 Estimated sewage _____
 Number of business _____
 Additional Commercial _____

Please attach a business description of the type of business and what is the zoning approved business _____

Date of aerobic system manufacturer's initial construction/installation _____
 Type of Aerobic Unit _____
 Is there an active septic system? _____
 If yes, when does it _____
 Who is the authorized person? _____
 Company Name _____
 Address _____

I hereby certify that the change of occupancy of _____

Applicant's signature _____
 Application Status: _____
 Disapproved: _____
 By: _____
 Approved: _____
 By: _____

DH 4081, 10/96 (Obsolet)

**BUSINESS SURVEY
AN ATTACHMENT TO DH 4081
ASSESSMENT OF WASTE HANDLING AND BUSINESS ACTIVITIES**

New: _____ Application/Permit Number: _____
 Renewal: _____
 Change of Tenancy/Amendment: _____

Please provide the following information regarding your business facilities and the activities which will take place on site.

Business Name: _____ Occupational License #: _____
 Business Owner's Name: _____
 Business Mailing Address: _____ Telephone: _____
 City: _____ State: _____ Zip: _____
 Street Address of Business: _____ Unit Number: _____
 City: _____ State: _____ Zip: _____

How many employees will use this facility: _____ Hours of operation: _____
 What type and number of sanitary facilities will be available at this location: Anticipated flow: _____ gpd Based on _____
 Toilets: _____ Urinals: _____ Hand Washing Sinks: _____ Utility Sinks: _____
 Showers: _____ Floor Drains: _____ Equipment Drains (Describe): _____
 2-Compartment Sinks: _____ 3-Compartment Sinks: _____
 Laundry Facilities: _____ Garbage Grinder/Disposal: _____
 Commercial Dish Machines (heat sanitizing): _____ (chemical sanitizing): _____
 Can Washing Facilities: _____ Other (Describe): _____

Completely describe the activities which will take place at your business location (i.e. types of waste generated, volume of raw materials handled, amount of wastes generated, equipment used in the process):

List any chemical compounds routinely used in your business: Attach Material Safety Data Sheets for Compounds Used or Stored

Name	Gal or lbs./Month	Amt. on hand	Storage Method	Disposal Method	SIC Code

Please list licensed waste haulers removing wastes from your site:

Company Name	Type of Waste Removed

Describe how emergencies, such as spills, will be handled at this site:

As the business owner, I understand that information contained in this application serves as a basis for determining the suitability of the onsite sewage disposal system to serve the business described above. Information contained herein is an accurate reflection of the activities which will be allowed on this site. I also agree to perform any testing as may be required by this permit, and collection & analysis of samples will be done at my own expense by a state certified laboratory. I also agree to notify the county health department of the change in any material fact used to determine the issuance of this permit.

Business Owner or Agent's Signature: _____ Date: _____
 Property Owner or Agent's Signature: _____ Date: _____

TO BE COMPLETED BY COUNTY HEALTH DEPARTMENT:

Will monitoring be required: Yes _____ No _____ Sample location: _____ Compounds to be examined: _____
 Is DER/ County Haz Waste review required: Yes _____ No _____ Monitoring Frequency: _____

Survey disapproved: _____ Date: ____/____/____ Reason: _____
 Survey approved: _____ By: _____ Title: _____ CHD Date: ____/____/____

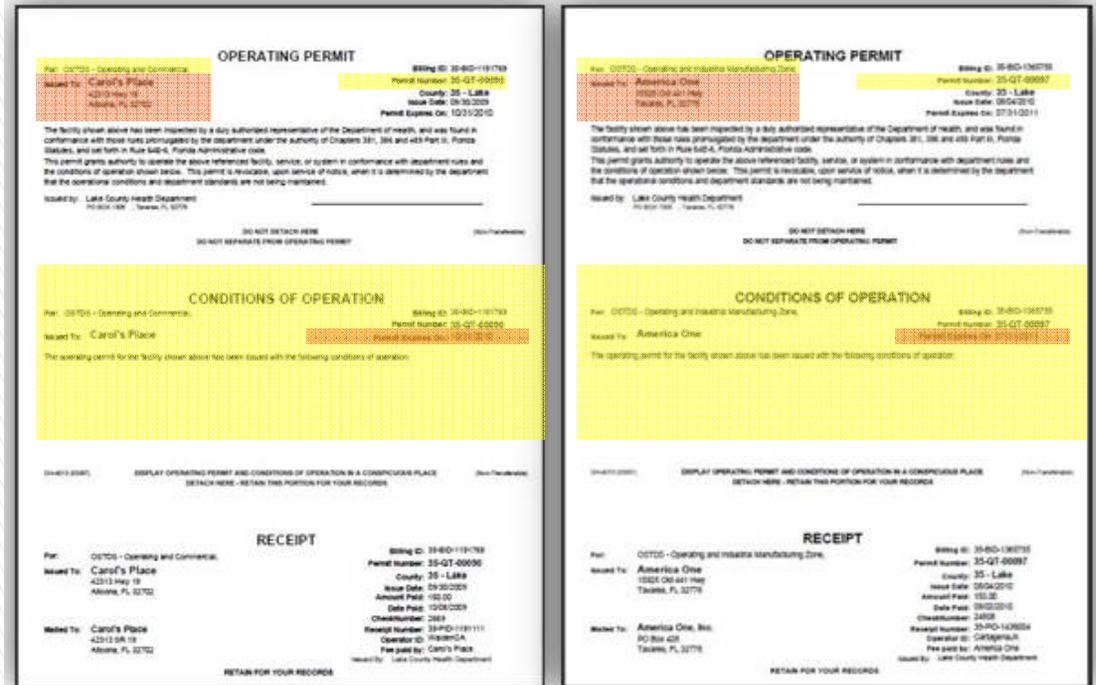
DH 4081A, 10/96 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.003, FAC Page ____ of ____

Operating Permit Application Considerations



I/M and Commercial Operating Permits:

- ▶ The permits bear:
 - Permit Type
 - Permit Number
 - Permit Owner and Location
 - Conditions of Operation
 - Expiration Date



Regulatory Items

Location on the Permit

Annual Operating Permit: System Inspections

- ▶ In order to ensure compliance with the conditions of operation specified on a Commercial or I/M Operating permit, an annual inspection is required.
- ▶ These inspections serve to determine whether any changes have occurred which would require the permit conditions to be amended or the permit to be revoked.
- ▶ The standard for determining if such is required, is comparison of the existing conditions to those specified on the originally approved permit and application.

Commercial and I/M Operating Permits Annual Inspections:

- Annual site inspections are conducted to verify that the conditions of operation stated on the permit are not being exceeded.
- These inspections serve to document the operating conditions and determine if there have been any changes from the permitted and approved operating conditions.
 - These inspections are conducted annually by the CHD.
 - If the operating conditions have changed, an existing system evaluation and permit amendment is required.
 - If there is sufficient change in the operating conditions, a system modification, repair, new system installation, or denial of the permit may be required.

Performing the Annual Inspection:

▶ Minimum requirements for the CHD's annual inspection:

- At minimum, the County Health Department Inspector must verify that there is no change from:
 - The approved system construction.
 - The approved structure.
 - The approved conditions of operation.
- The specifics for these items will differ based on the establishment being inspected.

What are examples of different conditions of operation that should be inspected?

Use the Operating Permit Inspection Form as a guide.

Maintenance Entities and Requirements

- ▶ Entities performing maintenance of these systems are the same that are authorized to install them.
- ▶ Minimum recommended maintenance for conventional systems in these circumstances is the same as for residential systems, but should occur more frequently depending on the operating conditions.
 - Pump the septic tank at least once every 3 to 5 years.
 - Service the outlet filter as needed between pump-outs.
 - Maintain the original site conditions as permitted and approved by the department.
 - Operate the system without exceeding the design parameters.



10:30-10:45

BREAK