



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

PERMIT NO. 14-0191
 DATE PAID: 4/2/14
 FEE PAID: 425.00
 RECEIPT #: 1141912

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: MCCARTY, DAVID & KATHLEEN

AGENT: _____ TELEPHONE: _____

MAILING ADDRESS: 225 SW MARY ANN GLEN, FT WHITE FL 32038

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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.

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PROPERTY INFORMATION

LOT: 12 BLOCK: _____ SUBDIVISION: SOUTHLAND TRAILS UNREC PLATTED: NA

PROPERTY ID #: 02-65-15-00504-112 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 10.09 ACRES WATER SUPPLY: PRIVATE PUBLIC [] ≤2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 225 SW MARY ANN GLEN, FT WHITE

DIRECTIONS TO PROPERTY: SR 247 SOUTH 12.6 MI TO CR 137
LEFT 4.1 MI TO 250th STREET, LEFT 1.3 MI TO SW
KINSEY SPRINGS TERR, LEFT TO SW MARY ANN GLEN.

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>RESIDENCE</u>	<u>2</u>	<u>1296A</u>	
2				
3				
4				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: [Signature] DATE: 4/2/14

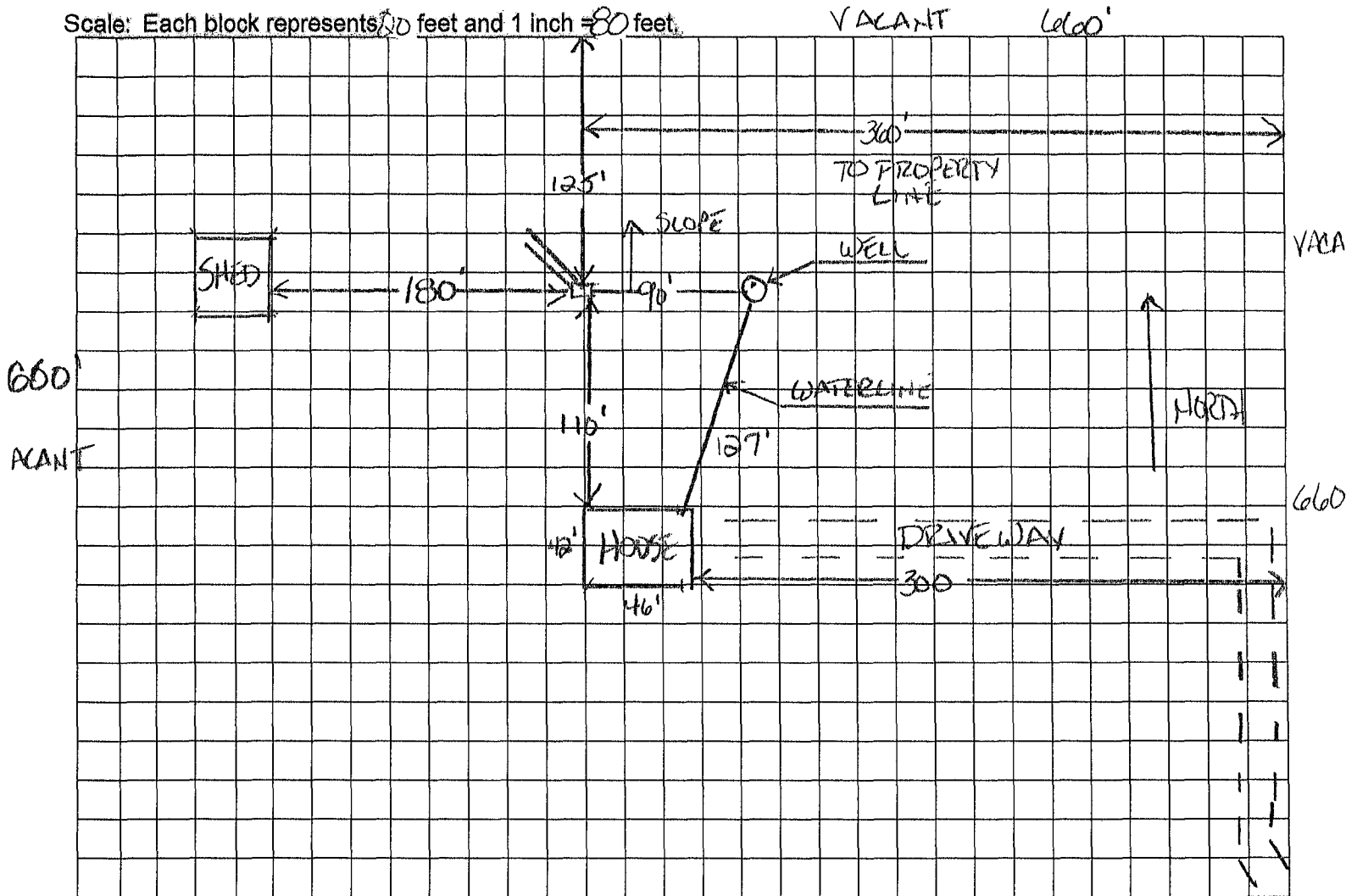
STATE OF FLORIDA
DEPARTMENT OF HEALTH

225 SW MARY ANN GLEN
SOUTHLAND TRAILS, FT WHITE
UNREC., LOT 12
10.09 ACRES

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Permit Application Number 14-0191

PART II - SITEPLAN

Scale: Each block represents 20 feet and 1 inch = 80 feet.



Notes. _____

Site Plan submitted by: Nathaniel Carter
 Plan Approved: [Signature] Not Approved _____ Date 4/2/14
 By: [Signature] Coleman 4/9/14 County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT