



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

PERMIT NO. 21-0464
 DATE PAID: 500.00
 FEE PAID: 511413
 RECEIPT #: 122223

APPLICATION FOR:

- New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Bonny Ross Beverly Jr

AGENT: _____ TELEPHONE: 757-971-8506

MAILING ADDRESS: 234 SW Honeycumb CT FT WHITE FL 32038

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: 19 BLOCK: _____ SUBDIVISION: TUSTENUGSEE WOODS PLATTED: 2004

PROPERTY ID #: 7-6-17-09621-419 ZONING: _____ I/M OR EQUIVALENT: Y N

PROPERTY SIZE: 10 ACRES WATER SUPPLY: PRIVATE PUBLIC <=2000GPD >2000GPD

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

PROPERTY ADDRESS: 234 SW Honeycumb CT FT WHITE FL 32038

DIRECTIONS TO PROPERTY: _____
TUSTENUGSEE SOUTH / TR SASSAFRAS / TL ON HONEYCUMB

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	METAL BLOB	N/A	1200 SF	ORIGINAL ATTACHED
2				
3				
4				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: Bonny Ross DATE: 5/14/21



