

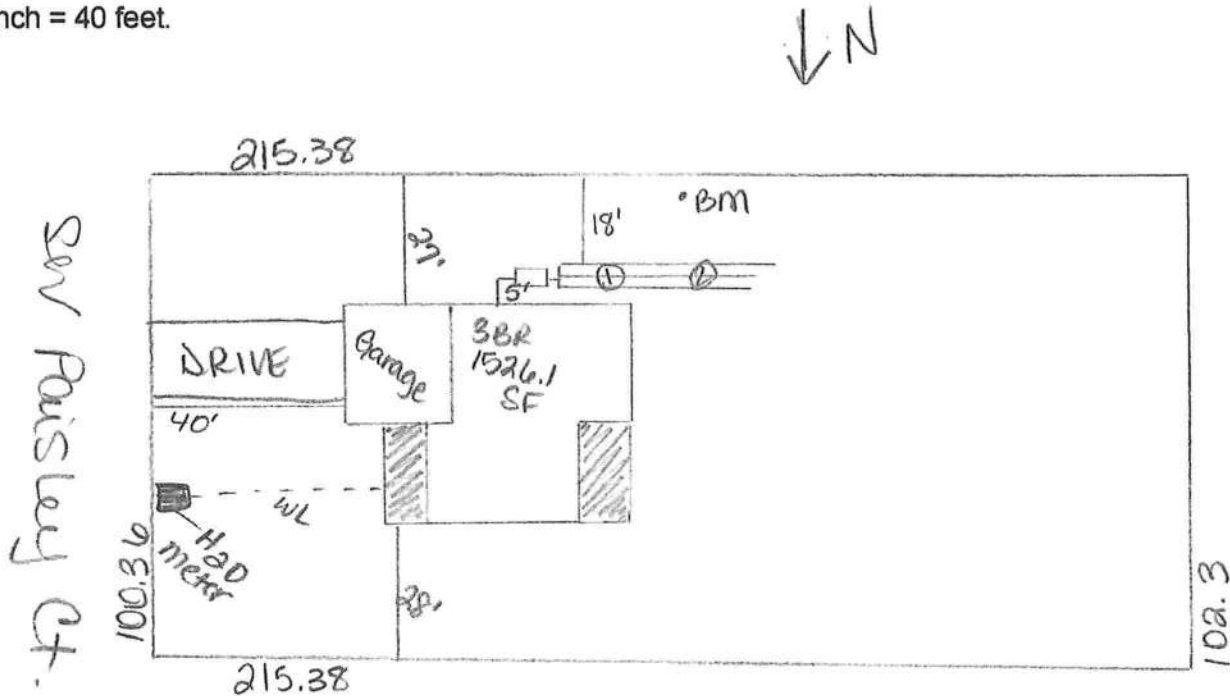
STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

Lisa's Land LLC. - lot 33

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Plan submitted by: William D. Bishop II  
Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_  
By \_\_\_\_\_

MASTER CONTRACTOR  
Date 2-23-21  
County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT