

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

PERMIT NO	27-0874
DATE PAID:	1012+00
FEE PAID: RECEIPT #:	1987389

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR:  [] New System [X] Existing System [] Holding Tank [] Innovative  [] Repair [] Abandonment [] Temporary []  APPLICANT: Randy and Cherisse Higgs  AGENT: Susan L. Fraze Telephone: (386) 292-1  MAILING ADDRESS: 346 NW Try Glen, Lake Caty, FL 32055
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:BLOCK:SUBDIVISION:PLATTED:
PROPERTY ID #: 11-4S-17-08315-002 ZONING: I/M OR EQUIVALENT: [ Y /N ]
PROPERTY SIZE: 5 ACRES WATER SUPPLY: [/] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER:FT
DIRECTIONS TO PROPERTY: US90E to HWY100E, Rt. on Price Creek Rd (CR245) 1.2 miles
BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
inground pool Axist 2018 18-0017
3 DECEIVED
OCT 2 0 2022  [ ] Floor/Equipment Drains [ Other (Specify) By
SIGNATURE: AUSAN X. FLAGE DATE: 105 2022

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

## STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

Scale: Each block represents 10 feet and 1 inch = 40 feet. Jak 250-145 world Notes: Site Plan submitted by: Not Approved Plan Approved\_ \_\_ County Health Department 10/28/22

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT