

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

	77 211
PERMIT NO.	20-0015
DATE PAID:	3116/22
FEE PAID:	40.00
RECEIPT #:	1810943

[] New System [✓] [] Repair []	Existing Syste Abandonment] me] Holding Tank] Temporary	[] Innovative []
APPLICANT: Randy Pate				
AGENT: Dale Burd			TE	LEPHONE: 386-365-7674
MAILING ADDRESS: 20619 Count	y Road 137, Lake Cit	ty, FL, 32024		
TO BE COMPLETED BY APPLICATED BY A PERSON LICENSED PURSUAPPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUIRED	NT OR APPLICANT ANT TO 489.105 TO PROVIDE DOC ESTING CONSIDER	(3) (m) OR 4 CUMENTATION RATION OF 5	189.552, FLORIDA OF THE DATE THE STATUTORY GRANDF	STATUTES. IT IS THE E LOT WAS CREATED OR ATHER PROVISIONS.
PROPERTY INFORMATION				
LOT: 13 BLOCK: NA	SUBDIVISION:	Sealey South	- Sealey West	PLATTED:
PROPERTY ID #: 21-3S-16-02239	9-113	ZONING	: I/M (DR EQUIVALENT: [No]
PROPERTY SIZE: .68 ACRE				
IS SEWER AVAILABLE AS PER			DISTA	ANCE TO SEWER: NA FT
PROPERTY ADDRESS: 230 NE Ire				
DIRECTIONS TO PROPERTY: U	S 90 West, TR Turner	r Ave, TL Irene	Lane, 3rd house on left	t
BUILDING INFORMATION	[✓] RESID	ENTIAL	[] COMMERC	IAL
		Building	Commercial/Inst	
Unit Type of No Establishment	Bedrooms	Area Sqft	Table 1, Chapte	itutional System Design er 64E-6, FAC
			Table 1, Chapte 2 BR for 2 BR Like for	er 64E-6, FAC
No Establishment			Table 1, Chapte	or Like
No Establishment SF Residential / MH			Table 1, Chapte 2 BR for 2 BR Like for	or Like
No Establishment 1 SF Residential / MH 2			Table 1, Chapte 2 BR for 2 BR Like for	or Like
No Establishment 1 SF Residential / MH 2		1127	2 BR for 2 BR Like for ORIGINAL AT	or Like TACHED

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STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

DAR	Permit Applicat	tion Number
Scale: 1 inch = 40 feet.		
PIFAS	E SEE AHADRED	
Notes:		
Site Plan submitted by		CONTRACTOR
Plan Approved	Not Approved	Date
By		County Health Departmen

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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