## STATE OF FLORIDA DEPARTMENT OF HEALTH



APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number\_ ---- PART II - SITEPLAN -----Scale: Each block represents 10 feet and 1 inch = 40 feet. 201 , (5t<sub>L</sub>) 45 Notes. Site Plan submitted by Bernar & Owner Grahamas BIENAPPINVED\_V Not Approved\_ County Health Department By\_\_\_\_

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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

PERMIT NO.	14-00915
DATE PAID:	3/14/14
FEE PAID:	1333
RECEIPT #:	U36492

Control Market Control	SYSTEM APPLICATION	FOR CONST	RUCTION PI	RMIT	RECEIPT #:	<u> </u>
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	neinaid C					0,,0,0
AGENT:	Mest 14	as Fill		T	ELEPHONE: 336	<u> 76/-91</u> 1
		nw	Baughi	St. Las	,	
TO BE COMPLETE BY A PERSON LI APPLICANT'S RE PLATTED (MM/DD	CENSED PURSUAN' SPONSIBILITY TO (YY) IF REQUES'	r to 489.10 O PROVIDE D ring Consid	5(3)(m) OR OCUMENTATION	IZED AGENT. SY 189.552, FLORID. N OF THE DATE T STATUTORY GRAND	A STATUTES. I HE LOT WAS CRE	CONSTRUCTED T IS THE ATED OR
PROPERTY INFOR					. /	
LOT: <u>3</u> F	BLOCK: A	SUBDIVISION	: Pine	Hills Addu	FON PLATTE	D:
			•	s: Res I/M		
PROPERTY SIZE:	<u>1.74</u> ACRES	WATER SUPP	LY: [ ] PR	IVATE PUBLIC	_]<=2000GPD [	]>2000GPD
IS SEWER AVAIL	ABLE AS PER 38:	1.0065, FS?	[X/N]	DIST	ANCE TO SEWER	:FT
PROPERTY ADDRE	ss: /533	NW 3	autor 5	t Lake (	Peter Fl.	32055
DIRECTIONS TO	PROPERTY: 4	(1 n. 7	D. Sun	sannee Va	alles Ra	1 4
To Parne	,// RJ.	Pon Ba	who Id	rannee Ve		
BUILDING INFOR	MATION	[ A RESI	DENTIAL	[ ] COMMER	CIAL	
Unit Type of No Establis	hment	No. of Bedrooms		Commercial/Ins Table 1, Chapt		tem Design
1 Mobi	16 Klom	3	1104			
2	ik i401"		1104			
3						
4						
[×] Floor/Eq	uipment Drains	n[] Oti	ner (Specify	·)		
signature: Z	West St	askin			DATE: 2	-19-1學