



STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM (OSTDS)

PERMIT NO. 23-0273
DATE PAID: 5/18/23
FEE PAID: 500.00
RECEIPT #: 1924521

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

[] New System [☒] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: LINDA R. HARTLEY

EMAIL: _____

AGENT: _____

TELEPHONE: 386-752-2404

MAILING ADDRESS: 132 NE ERIK WAY

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

OSTDS REMEDIATION PLAN? [Y / N]

LOT: 1-4 BLOCK: _____ SUBDIVISION: Oscella Estates 4-1 PLATTED: _____

PROPERTY ID #: 15-35-1810276-000 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 4.3 ACRES WATER SUPPLY: [☒] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 132 NE ERIK WAY

DIRECTIONS TO PROPERTY: From Gum Swamp Rd Turn Right on Mt Carmel
approx 1 mile to Erik Way - House on corner

BUILDING INFORMATION

[] RESIDENTIAL

[] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC
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1	<u>Garage</u>	<u>-</u>	<u>780</u>	
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2				ORIGINAL ATTACHED
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3				
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4				
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[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: Linda R. Hartley DATE: 5-16-23

DEF 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

Incorporated 62-6.004, FAC

STATE OF FLORIDA
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APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

23-0378

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.

See attached

Notes: _____

Site Plan submitted by:

Linda R. Hartley

Plan Approved ☒

Not Approved ☐

Date 5-16-23

By [Signature] Calabria County Health Department

5/19/23

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

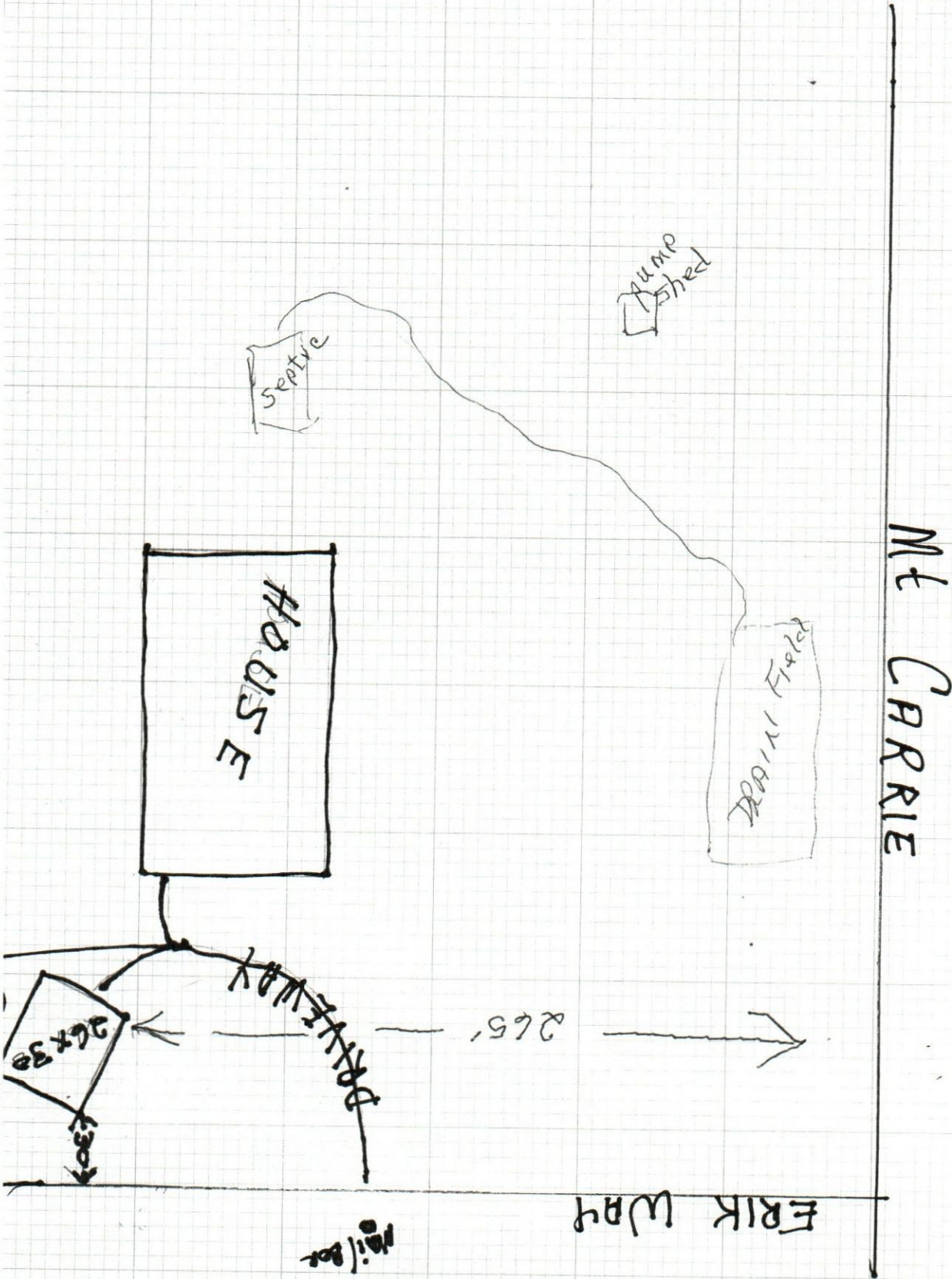
DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used)

Incorporated: 62-6.004, F.A.C.

Page 2 of 4

See attached

23-0373



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The Irrigation Innovators

Industries Incorporated • The Irrigation Innovators

11000 Street • San Marcos, California 92069 • TEL: (1) 760-744-5240 • FAX: (1) 760-744-7461

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PIN 700688 LIT-247 202

Designed For: _____

Designed By: _____

Date: _____

Scale: _____