

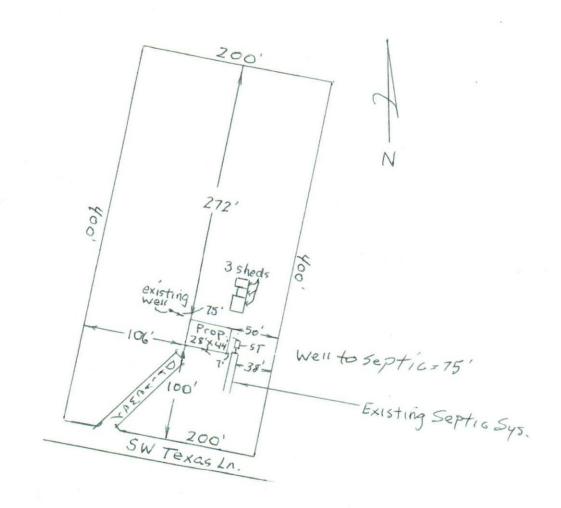
## STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT

	AA 2565
PERMIT NO.	OD-OPP
DATE PAID:	7/15/20
FEE PAID:	60.00
RECEIPT #:	152684

	CATION FOR: New System Repair	[ ]	Existing Systabandonment	tem [	]	Holding Ta	ink	[ ]	Innovative
APPLI	CANT: Wright, Gary	7							
AGENT	: Robert Minnella						TELE	PHONE	: 352-472-6010
MAILI	NG ADDRESS: 257	43 SW 22							
TO BE BY A APPLI PLATT	COMPLETED BY A PERSON LICENSED CANT'S RESPONSI ED (MM/DD/YY) I	PPLICAN PURSUA BILITY F REQUE	IT OR APPLICAN ANT TO 489.10! TO PROVIDE DO STING CONSIDER	NT'S AUTHO 5(3)(m) OR OCUMENTATI ERATION OF	A89	9.552, FLORI OF THE DATE ATUTORY GRAN	YSTENDA ST	MS MU: TATUT LOT WI HER PI	AS CREATED OR ROVISIONS.
	RTY INFORMATION						====		
LOT:	27-28 BLOCK:	5	SUBDIVISION	: Three Rive	rs Est	tates			PLATTED:
PROPE	RTY ID #: 00-00-0	00-01438-	127	ZONII	NG:		M OR	EQUIV	VALENT: [ No ]
PROPE	RTY SIZE: 1.83	ACRES	WATER SUPP	LY: [ / ] P	RIVA	TE PUBLIC	[ ]	<=200	OGPD [ ]>2000GPD
						DI	STANC	E TO	SEWER:FT
	RTY ADDRESS: 19			2	o to S	SW Utah TL Fo	ollow a	round t	o the first left at Roberts
									RANGE FLAG on the
right at		TR. 00	to Boundary 12.	GO TO SW TEX	as Li	ITR. Go about	300 ICC	it to Or	CANGET LAG OII tile
	ING INFORMATION		[ / ] RESII	DENTIAL		[ ] COMME	RCIA	<u> </u>	
	Type of Establishment								al System Design
1	DW Mobile Home		2	1456	21	People	GINAI	LATT	ACHED
2					_	The	المود	aar	alan in
3	Fifth Wheel		2	?	?	8	ia	ina	0
4							8		•
[ ]	Floor/Equipmen	t Drain	s [ ] Oth	ner (Specif	<b>Ey</b> )				
SIGNA	Robert N	Minnel	Digitally signed by Rob DN: cn=Robert Minnel Date: 2015.02.17 15:49	la, o, ou, email=rminela@bellsouth	i.net, c=US		D;	ATE:	07-15-2020

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

	Permit Application Number_	20-0555
Gary Wright 00-00-01438-127 PART II - SI	TE PLAN1" = 100'	



Notes: Replacement home. U	Jse existing well and sep	tic. No pertine	nt offsite features within 75'
of property lines.			
Site Plan submitted by: Bokert	Minnella Da	ate: 07-14-2020 A	gent
Plan Approved Robert Mir	Prot Approved	-//	Date 1/20/20
Ву		0	County Health Department
DH, 4015 08/09 (Obsoletes previous editions which	LUST BE ARPROVED BY THE		TH DEPARTMENT Page 2 of 4