

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

PERMIT NO.	22-0451
DATE PAID:	511817
FEE PAID:	LDD.080
RECEIPT #:	1824001

APPLICATION FOR:			1
[] New System [] E: [] Repair [] A	xisting System [] Ho bandonment [] Te	olding Tank [] Innovative imporary [X] Swimming Pos	21
APPLICANT: DOVIM INC	Inture	0	7
AGENT: Chad Cunningham	- Peeler Pools of N. FZ	TELEPHONE: 386-755-28	24
MAILING ADDRESS: 8396	Sw old Wire B	TELEPHONE: 386-755-28 2d Ft. White FL 32038	
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUANT APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUEST	OR APPLICANT'S AUTHORIZED ACT TO 489.105(3)(m) OR 489.552 PROVIDE DOCUMENTATION OF THE TIME CONSIDERATION OF STATUTO	GENT. SYSTEMS MUST BE CONSTRUCTED 2, FLORIDA STATUTES. IT IS THE HE DATE THE LOT WAS CREATED OR ORY GRANDFATHER PROVISIONS.	
PROPERTY INFORMATION TO BLOCK: S	act 16 Nature Car	LOTIGING LINK PLATTED:	
11-43-16	-01608-116 ZONING:	I/M OR EQUIVALENT: [Y N	
PROPERTY SIZE: (U.02 ACRES	WATER SUPPLY: [N PRIVATE	PUBLIC []<=2000GPD []>2000GPD	
IS SEWER AVAILABLE AS PER 381	.0065, FS? (y / N]	DISTANCE TO SEWER: FT	
property address: 332 N	W Crawford Ct.	While Springs F1 2709	16
DIRECTIONS TO PROPERTY:	no a number no	Madison Ban	~
VIWIN BIVO, BOX	I talling (xeek Ro	1 Don Tassia	
Black St (D) on	Crawford Ct. f	louse on (I)	
BUILDING INFORMATION			
Unit Type of No Establishment	No. of Building Commerce Bedrooms Area Sqft Table 1	cial/Institutional System Design 1, Chapter 64E-6, FAC	
2 Swimmingpeol		ORIGINAL ATTACHED	
3			
4			
] Floor/Equipment Drains	Other (Specify) SW	mming pull	
IGNATURE:		DATE: 5-5-22	
H 4015 00/00 100 1			

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 22-045

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David McIntyre 332 NW Crawford Ct. White Springs, FL 32096 Property 10: 14-25-16-01608-116 22-0451

