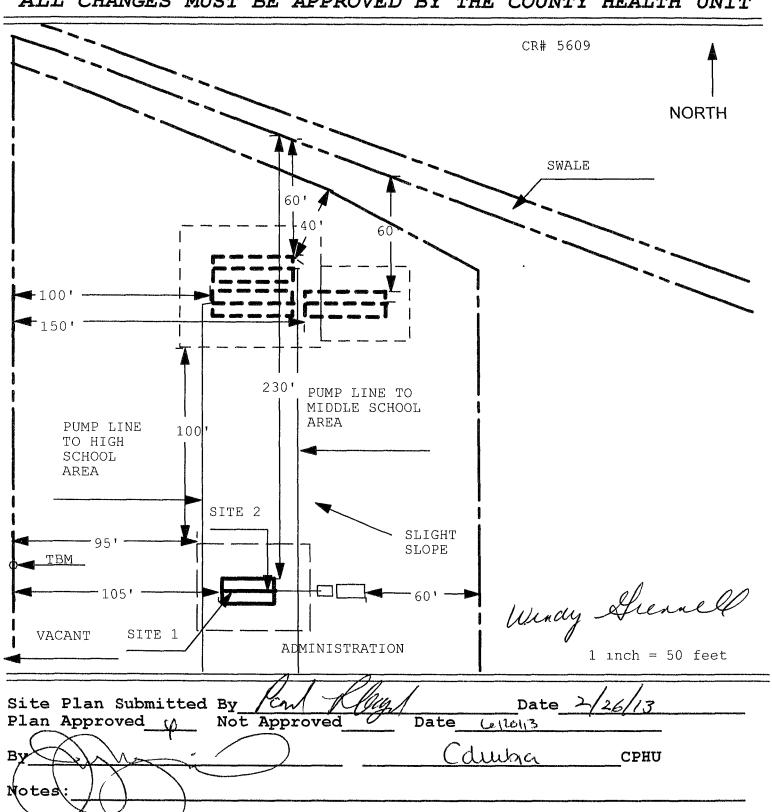
Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number:

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



PERMIT NO. DATE PAID:



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATME

SYSTEM	WAGE TREATMENT AND DISPOSAL			receipt #: 31030		
	ON FOR CONSTRUC	CTION PER	MIT .			
APPLICATION FOR: [X] New System [[] Repair [] Existing Syste] Abandonment	em []	Holding Tan	k []	Innovative	
APPLICANT: NEW GENERATI						
AGENT: NORTH FLORIDA PRO	FESSIONAL SERVICE	sinc.	dy Grennell	ELEPHONE:	384-288-2428 (386) 752-4675	
MAILING ADDRESS: PO BOX					FL 32025	
TO BE COMPLETED BY APPLI BY A PERSON LICENSED PUR APPLICANT'S RESPONSIBILI PLATTED (MM/DD/YY) IF RE	SUANT TO 489.105(3 TY TO PROVIDE DOC	3)(m) OR 4 UMENTATION	89.552, FLORII OF THE DATE T	A STATUT	ES. IT IS THE AS CREATED OR	
PROPERTY INFORMATION						
LOT: N/A BLOCK: N/A	SUBDIVISION:	METES AND	BOUNDS		PLATTED:	
PROPERTY ID #: 07-4S-17-08	3110-000	ZONING	: <u>COM</u> I/M	OR EQUIV	ALENT: [NO]	
PROPERTY SIZE: 25.150 AC	RES WATER SUPPLY:	: [] PRI	VATE PUBLÎC []<=200	0GPD [X]>2000GPD	
IS SEWER AVAILABLE AS PE	R 381.0065, FS? [NO 1	DIS	TANCE TO	SEWER: N/A FT	
PROPERTY ADDRESS: 643 SW	MARVIN BURNETT RI	D.				
DIRECTIONS TO PROPERTY:	90 WEST TURN LEFT ON SISTERS WELCOME RD. TURN LEFT ON BASCOM NORRIS DR. TURN RIGHT ON MARVIN BURNETT RD. ON CORNER WITH HIDAWAY DR.					
BUILDING INFORMATION [] RESIDENTIAL	[X] COMM	ERCIAL			
Unit Type of No. Establishment		_	Commercial/Ins Table 1, Chapt		l System Design FAC	
1 SCHOOL	0		ADMINISTRATION	N BUILING		
2			4 SCHOOL WORK	(ERS = 200	GPD*	
3			* MINIMUM LOAD	ING RATE		
4				GPD		
[] Floor/Equipment Da	ains [] Other	(Specify)				
SIGNATURE: Warden	Man all	01		DATE:	6/4/13	

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC