

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

2	DALE
PERMIT NO.	13-0672
DATE PAID:	9/22/20
FEE PAID:	2000
RECEIPT #:	45/2100

APPLICATION FOR:  [ ] New System [ / ]  [ ] Repair [ ]	Existing Syst	Tom To	l Holdin	g Tank	[ ]	Innovative
APPLICANT:		RACHEAL H	OFFMANN-OT	S		
AGENT: MITCH BRANCH	- mitchbran	chonline@y	ahoo.com	TELE	PHONE:	904-703-3807
MAILING ADDRESS:						
TO BE COMPLETED BY APPLICA BY A PERSON LICENSED PURSU APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQU	JANT TO 489.105 TO PROVIDE DO JESTING CONSIDE	(3) (m) OR CUMENTATION RATION OF	489.552, FI ON OF THE DA	ORIDA STATE THE I	TATUTES	. IT IS THE
PROPERTY INFORMATION LOT: HA BLOCK: NA					V <i>rec</i> Pl	ATTED: 12-14-92
PROPERTY ID #:25-3S						
PROPERTY SIZE:1.05 ACRE	S WATER SUPPL	Y: [ / ] PF	RIVATE PUBL	IC [ ]<	=2000GF	PD [ 1>2000GPD
IS SEWER AVAILABLE AS PER						
PROPERTY ADDRESS:	215 S	W VELVET	GLEN. LAKE C	ITY FL 3	2034	MER. ONK FT
DIRECTIONS TO PROPERTY:						
	0 MILE, T/R @ S					
BUILDING INFORMATION	[ ] RESID	ENTIAL	[ ] co	MMERCIAL		
Unit Type of No Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC			
	3					t05-1228N
2 NEW MOBILE HOME	3	1140				
3			ORIC	GINAL AT	TACHE	0
4						
[ ] Floor/Equipment Drain	s [ ] Othe	er (Specify	7)			
SIGNATURE:				DA	TE: _ 9	119/23

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

