

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

PERMIT NO.	21-0887
DATE PAID:	1005/21
FEE PAID:	ODIAN
RECEIPT #:	1759ani

APPLICATION FOR: [] New System [] Existing System [] Repair [] Abandonment	[] Holding Tank [] Innovative [] Temporary []
APPLICANT: Mora Cochian	
AGENT: Te). Prevatt	TELEPHONE: 904-368-977
MAILING ADDRESS: 9904 NW C12 279	5tarke, FC 32091
TO BE COMPLETED BY APPLICANT OR APPLICANT'S BY A PERSON LICENSED PURSUANT TO 489.105(3)(APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUME PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATI	NTATION OF THE DATE THE LOT WAS CREATED OR
PROPERTY INFORMATION	
LOT: U BLOCK: A SUBDIVISION: ha	nchettes PLATTED: 10/73/20
	ZONING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 2.06 ACRES WATER SUPPLY: [PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y	N DISTANCE TO SEWER:FT
PROPERTY ADDRESS: 288 NW ASh Dr La	the City, FL 32055
DIRECTIONS TO PROPERTY: & on US 90, &	on NW Turner Ave, L on
NW ASh Dri Destination on	left-
BUILDING INFORMATION [/] RESIDENTIA	AL [] COMMERCIAL
Unit Type of No. of Buil No Establishment Bedrooms Area	ding Commercial/Institutional System Design Sqft Table 1, Chapter 64E-6, FAC
1 < FX 3	
2 M-ground Abergys	ORIGINAL ATTACHED —
4	
[] Floor/Equipment Drains [] Other (S	specify)
SIGNATURE: 11. 4	DATE: 10(27/2(

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STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 238

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