STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number_____

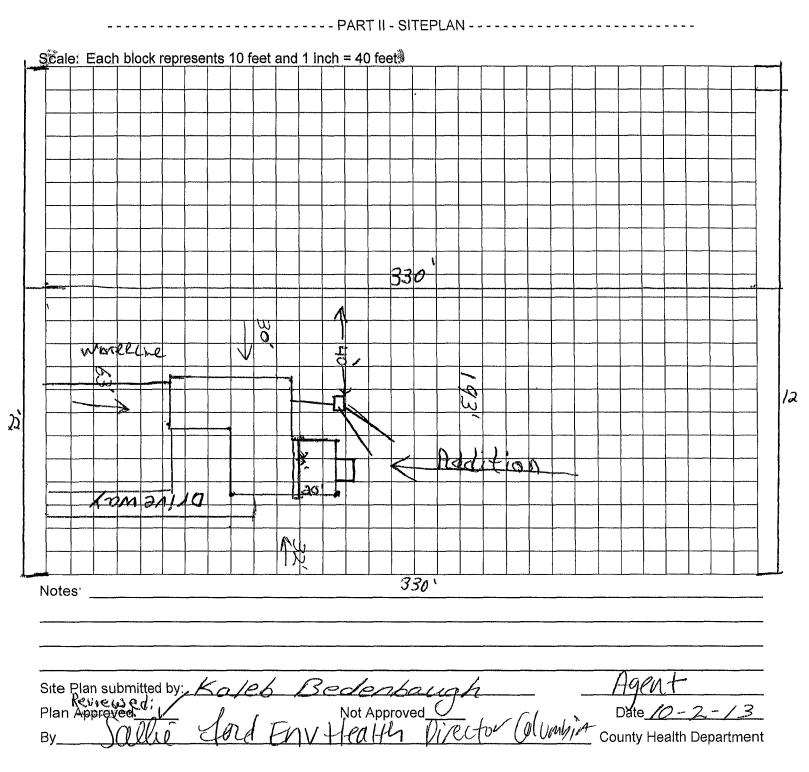
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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 13-25178





STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT NO.	13-05175
DATE PAID:	1018113
FEE PAID:	40.00
RECEIPT #:	11921161

APPLICATION FOR	CONSTRUCTION PERMIT	RECEIPT #: 11321(6)
APPLICATION FOR: [] New System [] Exist [] Repair [] Aband	ting System [] Holdi donment [] Tempo	ng Tank [] Innovative
APPLICANT: Timothy &	charlyne Walkel	
AGENT: Kaleb Beder	baugh	TELEPHONE:(386)242-249
MAILING ADDRESS:		<i>"</i> "
	/	Kecity, FL 32055
BY A PERSON LICENSED PURSUANT TO APPLICANT'S RESPONSIBILITY TO PI PLATTED (MM/DD/YY) IF REQUESTING	O 489.105(3)(m) OR 489.552, ROVIDE DOCUMENTATION OF THE G CONSIDERATION OF STATUTORY	DATE THE LOT WAS CREATED OR
PROPERTY INFORMATION		210
LOT: 6 BLOCK: SUB	DIVISION: Deef ward	forest platted:
PROPERTY ID #: 09-45-/7-	08302006 zoning: ReS	· I/M OR EQUIVALENT: [Y N]
property size: . A acres wa	TER SUPPLY: [] PRIVATE PU	JBLIC [/]<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0	065, FS? [Y (N)	DISTANCE TO SEWER:FT
		Lake City, FL 32025
		South PRST
Aligator Park. 7		•
4th house on		
BUILDING INFORMATION [RESIDENTIAL []	COMMERCIAL
		al/Institutional System Design Chapter 64E-6, FAC
SF Existing	3 1568	Onlaw
ADDITION	2586 2144 Total	ORIGINAL ATTACHED
3	CX300 2199 /5141	Appli Cubiaco
4	3 2144 Intal	PAPATICATION
	3 diff 1000	complete 108,12
[] Floor/Equipment Drains] Other (Specify)	
SIGNATURE:		DATE: 10/3/19

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