

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

PERMIT NO.	22.0449
DATE PAID:	5/18/22
FEE PAID:	60.00
RECEIPT #:	1832882

MEETITCHITON TO	A CONSTRUCTION F.	CIRCIT I	
APPLICATION FOR:  [ ] New System [ ] Existen [ ] Abar	sting System [	] Holding Tank	[ ] Innovative
[ ] Repair [ ] Abar	ndonment	] Temporary	[ ]
APPLICANT: EUGENE Sp	oziani / Tr	icia Spaz	ianı
AGENT:		TEI	EPHONE: <u>214-480-403</u> 2
MAILING ADDRESS: 435 SW 7	lidge Street	Lake City Fla	35054
TO BE COMPLETED BY APPLICANT OF BY A PERSON LICENSED PURSUANT S APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUESTIN	TO 489.105(3)(m) OR PROVIDE DOCUMENTATIO	489.552, FLORIDA N OF THE DATE THE	STATUTES. IT IS THE LOT WAS CREATED OR
PROPERTY INFORMATION		The second secon	
LOT: 2,3 (4 BLOCK: SU			
PROPERTY ID #: 25-45-16-03			9
PROPERTY SIZE: 16 ACRES W	ATER SUPPLY: [X] PR	IVATE PUBLIC [	]<=2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 381.	0065, FS? [Y/N]	DISTAL	NCE TO SEWER: FT
PROPERTY ADDRESS: 435 SW	Ridge St La	ke City Fl	32024
DIRECTIONS TO PROPERTY: 47	South to R	idea Rd	
DIRECTIONS TO ENGLISH.	300 M	· jc rc	
	\ <u>\</u>		
BUILDING INFORMATION	[X] RESIDENTIAL	[ ] COMMERCI	AL
Unit Type of No Establishment	Bedrooms Area Sqft	Commercial/Insti Table 1, Chapter	tutional System Design 64E-6, FAC
1 Storage Building	\$ 50x90	ORIGINAL ATTAC	HED TILLIAM
2 SISTAGE BUTTETRY	7 34/10	-	met 1985
3			N
4			
[ ] Floor/Equipment Drains	[ ] Other (Specif	y)	
SIGNATURE: Euge / Jes	٠.		DATE: 5/11/22
DH 4015, 08/00 (Obsoletes previous Incorporated 648-6.001 FAC	lous editions which	may not be used)	Page 1 of 4
	Spaziani . Gene	Oyahas.co	M

## STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23 -0 449

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te Plan submitted by: Egere Spaziani TITLE											DATE: 5/16/22																	
and American														Date 5/24/22														
Columbia CHD															(	los	um	bia	) (	HI	J		County Health Departmen					