

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number \_\_\_\_\_

N

PART II - SITEPLAN

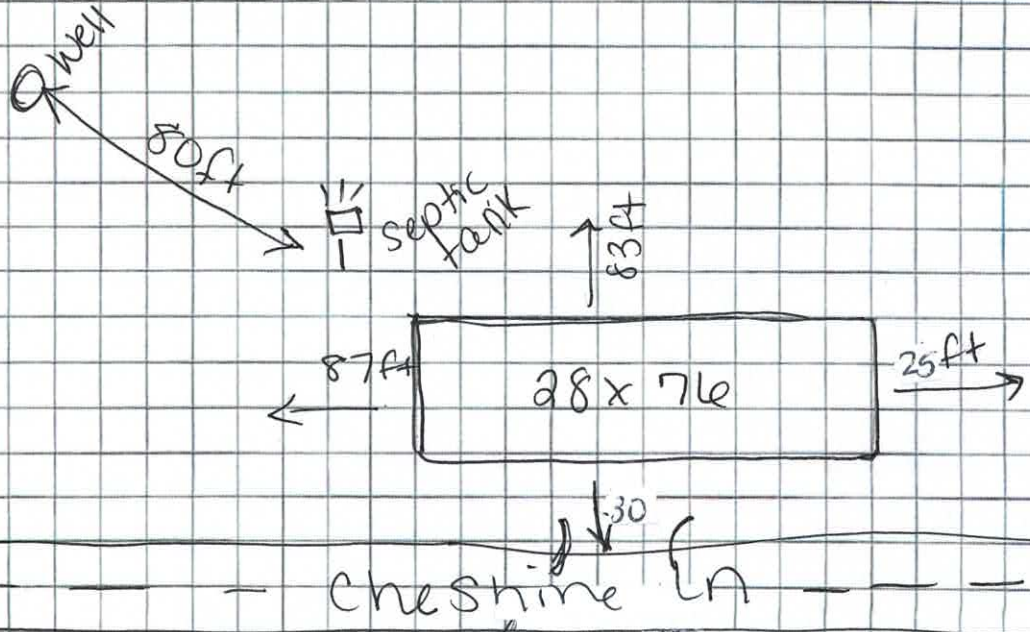
Scale: Each block represents 10 feet and 1 inch = 40 feet.

174

W  
129

E  
129

↑ N



Notes: \_\_\_\_\_

Site Plan submitted by: Robert Calvert TITLE \_\_\_\_\_ DATE: \_\_\_\_\_

Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

By \_\_\_\_\_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT