386 758 2187

ENVIROMENTAL HEALTH

386-497-4866

p.4

08:51:52 a.m. 05-16-2013

2/3

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number -- PART II - SITEPLAN -----Scale: 1 inch = 40 feet. 210 CAR 6 48 1 of 10 Acres MASTER CONTRACTOR Site Plan submitted by: Not Approved Plan Approved

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-5)

County Health Department

386 758 2:87

ENVIROMENTAL HEALTH

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08:52:16 a.m. 05-16-2013

3/3



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

PERMIT NO.	13-22816
DATE PAID:	SIDIL
FEE PAID:	135.00
RECEIPT #:	1107695

r	LICATION FOR:	Existing	System	[]	Holding Tank	1 1	Innovativo
] Repair []	Abandonme	nt	[]	Holding Tank Temporary	į į	
APP	LICANT: Blake Smith						
AGE	NT: ROCKY FORD, A & B	CONSTRUCTION	ı		TEI	EPHONE:	386-497-2311
MAI	LING ADDRESS: 546 SW D	ortch Street	, FT. WHITE	, FL.			
233							
APPI	BE COMPLETED BY APPLIC A PERSON LICENSED PURS LICANT'S RESPONSIBILIT TTED (MM/DD/YY) IF REQ	y To ponting	TO (3) (III) (0)	R 489.	.552, FLORIDA :	STATUTES	S. IT IS THE
	PERTY INFORMATION			- 1			
LOT:	naBLOCK: na	SUB: na		£		PI	LATTED:
PROP	ERTY ID #: 02-55-16-0	3437-004	ZONI	NG:	foj. 1/M OR	EQUIVA	LENT: [Y/N]
PROP	ERTY SIZE: 10 ACRE	S WATER SU	PPLY: [X] P	RIVAT	F PUBLIC []	<=2000G	PD []>2000CPD
IS S	EWER AVAILABLE AS PER	381.0065, F	3? [Y /N]		DISTANC	CE TO SI	WER:
	ERTY ADDRESS: 530 SW						
	CTIONS TO PROPERTY: 47					len Te	and on loca
							Tiel to him tert
BUILD	ING INFORMATION	(X) RES	IDENTIAL	ı] COMMERCIAL	i.	
Unit No	Type of Establishment	No. of	Section 11 Proceedings of the Party of the P	Comm	ercial/Institu	tional	System Design
1		Bedrooms	Area Sqft	Tabl	e 1, Chapter 6	4E-6, F	AC
2	SF Residential	3	1556	3	B2 Like an	Lila	
-					cau no	1 - 1	
3					Ture 1100	LOCAT	e oug
t/\J	Floor/Equipment Drain	s_[M Ot	her (Specify	, _			
SIGNAT	TURE: Koch D	1-5			DA	TE: 5/1	0/2013
DH 401 Incorp	5, 08/09 (Obsoletes proporated 64E-6.001, FAC	revious edit	ions which m	ay no			