

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

PERMIT NO. 21-04/2
DATE PAID: 5/4/4
FEE PAID: 60.00
RECEIPT #: 1460379

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary [] Like to Like
APPLICANT: DOWN MILES - EVICKSON
AGENT: H&V CUSTOMER SEMICE, UC TELEPHONE: 384 286 96
MAILING ADDRESS: 301 SW FAW COURT Lakecity Pl 32024 Lamanda Motecognair wom
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY INFORMATION
LOT: 13 BLOCK: SUBDIVISION: WOOdglen PLATTED:
PROPERTY ID #: 34-25-16-01844-113 ZONING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 5 ACRES WATER SUPPLY: [V] PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y /N] DISTANCE TO SEWER.
PROPERTY ADDRESS: 327 NW Credoway Lakecyty to
DIRECTIONS TO PROPERTY: 2 anto NW Main Blvd, Donto NW Fiddlers line
Donto NN Oredo way - destination on (C)
BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 New Home 3bed/sboth 2254 sqft.
2 old Home Bleed stooth 2034 59 Ht.
3
4
[] Floor/Equipment Drains [] Other (Specify)
DATE: 4218

