

STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

ONSITE SEWAGE TREATMENT AND DISPOSAL

SYSTEM (OSTDS)

CR # 20-00116

PERMI DATE	T	NO.	2	2
DATE	P	AID:		10

FEE PAID:

RECEIPT #:

	ION FOR CONSTR	UCTION PE	RMIT			
APPLICATION FOR: [X] New System [[] Repair [] Existing Sys	tem [] Holding] Tempora:	Tank [ry [] Innovati	ve
APPLICANT: DAMIAN LEWIS	& ELIZABETH CREE	LEY				
AGENT: PELONI'S SEPTIC				TELEPHO	NE: (386) 755-1	616
MAILING ADDRESS: 330 NW	RAILROAD STREET		LA	KE CITY	FL 3	2055
TO BE COMPLETED BY APPLE BY A PERSON LICENSED PUT APPLICANT'S RESPONSIBIL PLATTED (MM/DD/YY) IF RE	RSUANT TO 489.105	5(3)(m) OR OCUMENTATIO	489.552, FL ON OF THE DA	ORIDA STAT	TUTES. IT I	S THE D OR
PROPERTY INFORMATION						
LOT: 28 BLOCK: N/	A SUBDIVISION	: INDIAN RIE	GE PA	_	PLATTED:	
PROPERTY ID #: 05-3S-16-0	1809-128	ZONIN				
PROPERTY SIZE: 5.010 AC	CRES WATER SUPPI	Y: [X] PF	RIVATE PUBL	IC []<=2	2000GPD [1:	>2000GPD
IS SEWER AVAILABLE AS PR						
PROPERTY ADDRESS: TI		1		210114101	10 DEWEK	WA FI
DIRECTIONS TO PROPERTY:	TAKE LAKE JEFFR RIDGE LANE. TURN					INDIAN
BUILDING INFORMATION	X] RESIDENTIAL	[] CON	MERCIAL			
Unit Type of No. Establishment	No. of Bedrooms	-	Commercial/ Table 1, Ch			esign
1 MOBILE HOME	3	1,568				×
2						
3		Security .				
4						
[] Floor/Equipment Dr	ains [] Other	(Specify)				
SIGNATURE:	Moto	1-		DATE	: 2-28	-23
_ /-						

DEP 4015, 06-21-2022 (Obsoletes previous editions which may not be used) Incorporated 62-6.004, FAC

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT 210' SLOPE NORTH SITE 2 CR# 20-00116 TBM SITE 1 WATER LINE U 210' 100' N P A 150' WELL D SWALE NO WELLS WITHIN 100' 1 INCH = 40 FEET

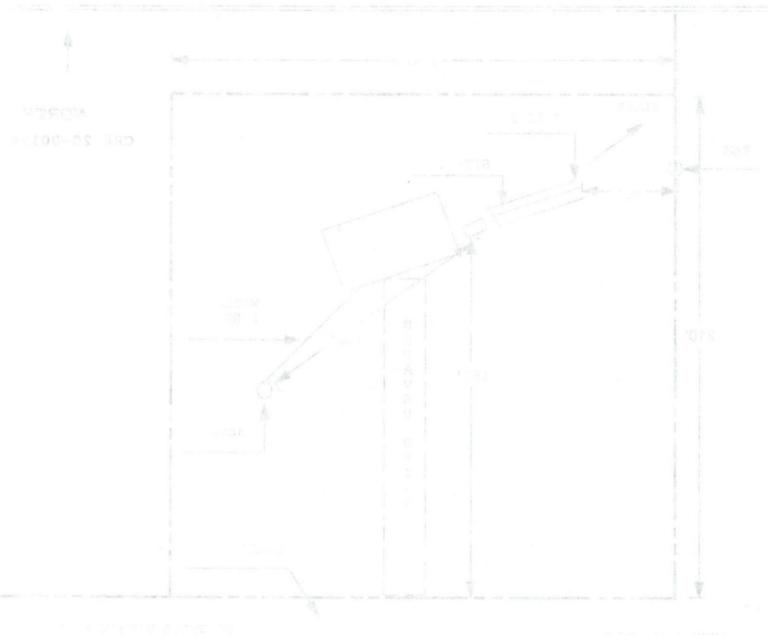
Site Plan Submitted By Rew Color Date 1/1/23
Plan Approved Not Approved Date 3/3/23

By Cokum CPHU

Notes:

Application for Ossite Sewage Dusposal System Construction Permit. Part II Site Flam Permit Application Number:

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



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ed a C	Plan Submitted	
Date	y peweaddy	
7890		V.E.

Notes: