

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

PERMIT NO.	W-0191
DATE PAID:	412114
FEE PAID:	415.00
RECEIPT #:	1141717

APPLICATION FOR: [X] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: MCCARTY, DAVID & KATHLER
AGENT:TELEPHONE:
MAILING ADDRESS: 2055W MAY2YANPGLOW, FT WATTE FL 32038
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: 10 BLOCK: SUBDIVISION: SOUTHLANDTRAICS UNREC PLATTED: PA
PROPERTY ID #: 02-65-15-00504-112 ZONING: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: O, O ACRES WATER SUPPLY: [X] PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER:FT
PROPERTY ADDRESS: 205 SW MATCH ANN GLEN, FT WHITE
DIRECTIONS TO PROPERTY: 58 247 SOUTH 12.6M1 TO CR 137
LEFT 4.1 MI TO 256th STREET, LEFT 1.3M TO SW
KINSEY SPIZINGS TERR, LEFT TO SW MARY ANN GLN
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 RCADENCE 2 13967
3
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: All (all)

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

STATE OF FLORIDA DEPARTMENT OF HEALTH

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