The	

STATE OF FLORIDA

PERMIT NO.	27-0058
DATE PAID:	1.24.22
FEE PAID:	60.00
RECEIPT #:	Ψ

DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT DATE PAID: FEE PAID: RECEIPT #:
APPLICATION FOR:
[] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: HELTON METHOD HECTOR MARRERO
AGENT:
MAILING ADDRESS: 436 MW 134 way new berry FL 32669
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: 86 BLOCK: 38 SUBDIVISION: Sm Ta Fe tives replat PLATTED:
PROPERTY ID #: 30-75-17-10058-676 ZONING: I/M OR EQUIVALENT: [Y /(N)]
PROPERTY SIZE: 1.43 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <= 2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER:FT
PROPERTY ADDRESS: 764 SW HE FIN AUE FORT White PL
DIRECTIONS TO PROPERTY: Head South on Sv. 47 Town Lett 27 En
Fort white Turn Right onto SW MUSTER Turn MATTER
Sw the Flin Ave Proper Ty
BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
$1 \leq 1 \leq 1 \leq 1$
2 Shed 0 312
3
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: JULY John John

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

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STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

1h-01-24-22

Permit Application Number

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