

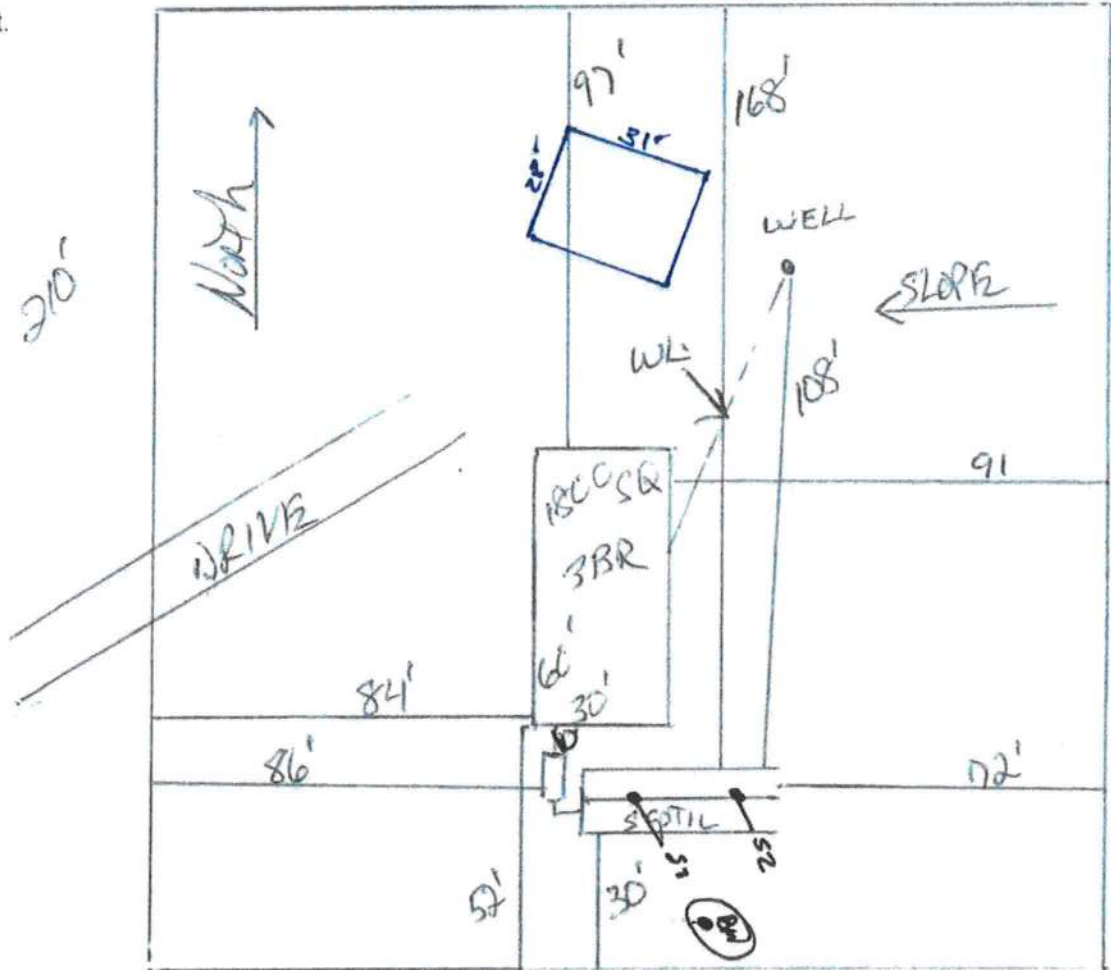
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 21-0307

D'Albrati

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: 1 of 5.5 Acres SEE ATTACHED
ROBERT JORDAN 3-23-2021

Site Plan submitted by: [Signature] CONTRACTOR
Plan Approved _____ Not Approved _____ Date _____
By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

49602