

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

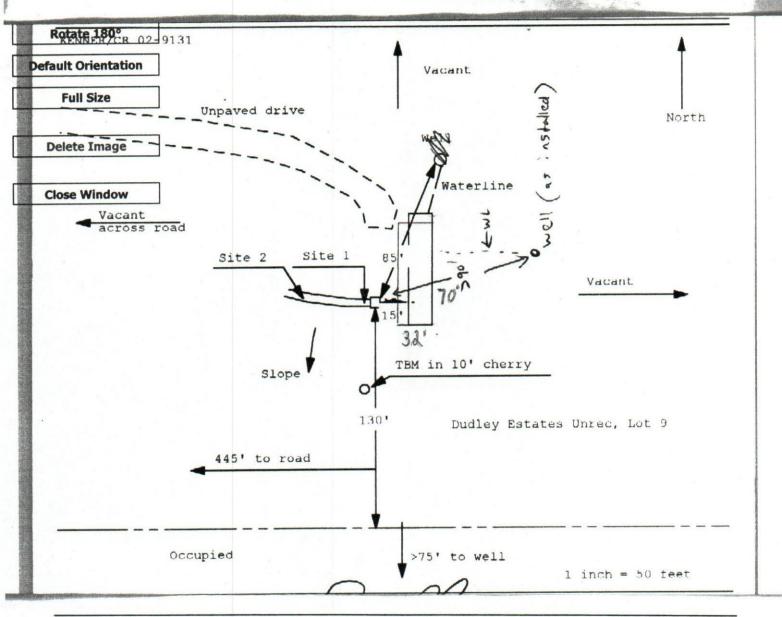
PERMIT NO.	13-0128
DATE PAID:	2/15/2
FEE PAID:	1987 AS
RECEIPT #:	1802821

APPLICATION FOR: [] New System [V] Ex [] Repair [] AN APPLICANT:	1 1	[] Holding Tank	[] Innovative
APPLICANT: LOUKO C	everus.		70/ 100 700
AGENT:		TI	ELEPHONE: 386-288-3958
MAILING ADDRESS: 3906 SU	JOO WIRE	Rd fortwh	11te F132038
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUANT APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUEST	TO 489.105(3)(m) PROVIDE DOCUMENTA	OR 489.552, FLORIDATION OF THE DATE TH	A STATUTES. IT IS THE HE LOT WAS CREATED OR
PROPERTY INFORMATION			
LOT: BLOCK:	SUBDIVISION: DC	dley	PLATTED:
PROPERTY ID #: 14-65-1	6-03818-20	9 NING: A-3 I/M	OR EQUIVALENT: [Y / N]
property size: 98 acres			
PROPERTY ADDRESS: 7051 5	0065, FS? [(Y) N	Re RO FORT	white FI 32038
DIRECTIONS TO PROPERTY: 47	5 Lonual	ex Rd Straig	nt on Oldwike R
BUILDING INFORMATION	N RESIDENTIAL	[] COMMERC	IAL
Unit Type of No Establishment	No. of Building Bedrooms Area Sc	gft Table 1, Chapte	itutional System Design r 64E-6, FAC
1 probile Home	3 1958	ORIGINAL A	ATTACHED
3			
4			
[] Floor/Equipment Drains	[] Other (Spec	eify)	
SIGNATURE: Juna	Quelax	0	DATE: 3/15/22

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STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 2 - 0 2



1				
Site Plan submitted by:	ura Cleveland Ager	nt: Owner:	Date:	
Plan Approved	Not Approv		Date_	2/18/22
Ву		CO	LUMBIA County H	Health Departmen

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

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