ROB AND NANCY

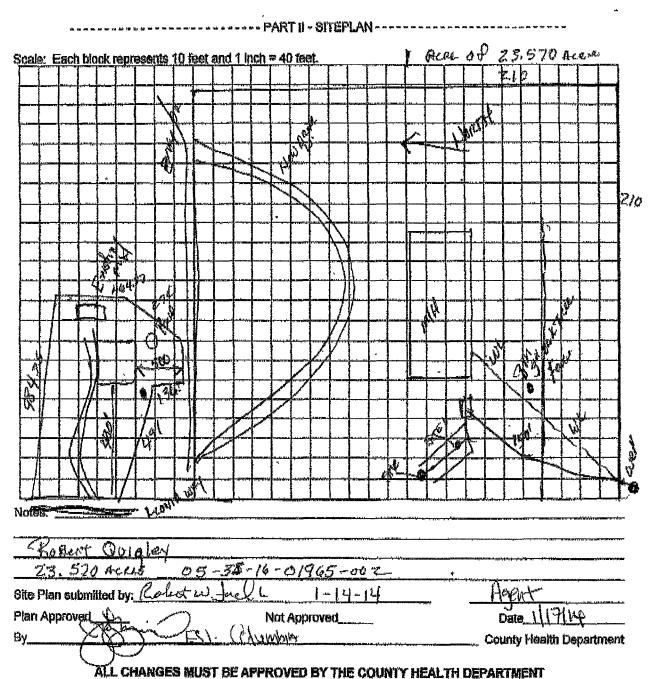
11:27,53 a.m. 01-22-2014

PAGE 01/01

## STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

AP 1401-37

Permit Application Number 14~ 2023



DH 4015, 08/08 (Obsoletes provious californs which may not be used). Incorporated: 045-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4



## STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

PERMIT NO.	14-0017
DATE PAID: FEE PAID: RECEIPT #:	314.00
RECEIPT #:	11291A

APPLICATION	FOR CONSTRUCT	ION PERMIT	****		
APPLICATION FOR:  [V] New System [ ] F  [ ] Repair [ ] F			ding Tank	[ ] Inn	ovative
APPLICANT: QUIQLOS	Instec		***************************************		
AGENT: PODENTONA	North Flor	icla Scoti	Claren	EPHONE:	50312
mailing address: 500 NV	1 Everdon	18t 11	CFI.S	52055	garangkan ankan biran kenampangan angkan ankan biran ka
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY T PLATTED (MM/DD/YY) IF REQUES	TT TO 489.105(3) (FO PROVIDE DOCUME	(m) OR 489.552 ENTATION OF TH	FLORIDA SE DATE THE	Statutes. Lot was cr	IT IS THE EATED OR
PROPERTY INFORMATION		<b>6</b>			
LOT: BLOCK:	SUBDIVISION: 1	1eets t	16	PLATI	TED:
PROPERTY ID #: 05-35-	1601965-00	CONING:	I/M OR	e equivalen	r: [ Y (N)
property size: 23.570 acres	WATER SUPPLY:	PRIVATE	PUBLIC [	]<=2000GPD	[ ]>2000GPD
is sewer <b>available as per 3</b> 8 property address: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	11.0065, FB? [Y		C F	CE TO SEWE	R:FT
DIRECTIONS TO PROPERTY:					
BUILDING INFORMATION	[ A RESIDENT:	IAL [	] COMMERCI	AL.	
Unit Type of No Establishment			cial/Instit 1, Chapter		stem Design
$\frac{1}{2}$ $\frac{1}{2}$	4 3	160			
2 - 11/17		<del>2-1</del>			
3					
4		***************************************			
[ ] Floor/Equipment Drains	[ ] Other (	Specify)	and the second s		
SIGNATURE: Kolent	-W 20-06 1		·	DATE: <u>1-/</u>	4-14

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

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