

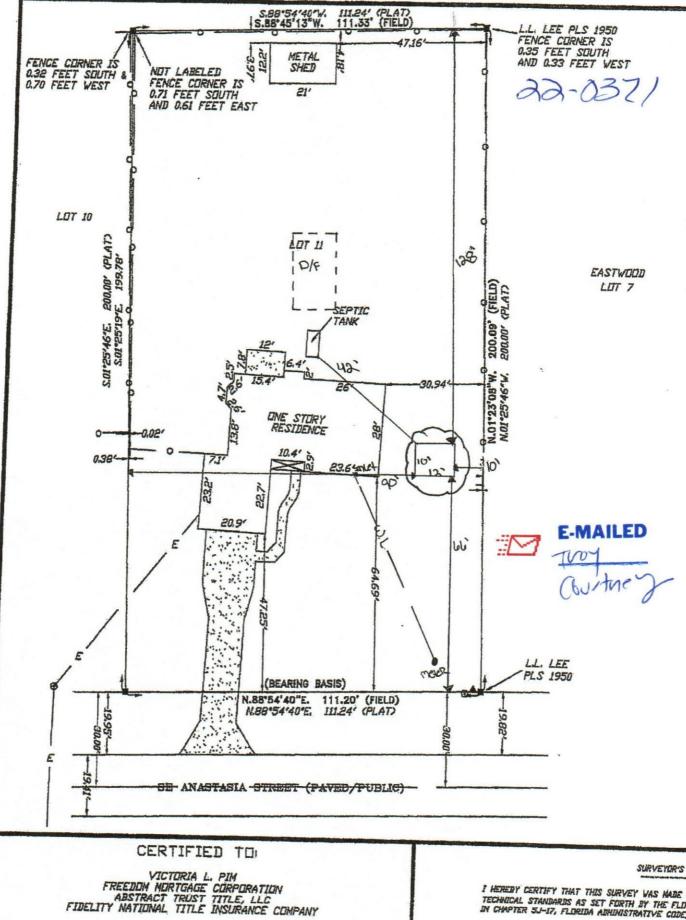
STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM

| | 1000 |
|------------|---------|
| PERMIT NO. | 99-0511 |
| DATE PAID: | 4 HOLD |
| FEE PAID: | 40.00 |
| RECEIPT #: | 1827137 |
| | 1 |

| | ATION FOR: New System [] Repair [] | Existing System | | - | [] Innovative | |
|--|--|--|-----------------------------------|--|---|--|
| | CANT: Michael T | and the same of th | | | | |
| MAILING ADDRESS: Too Harding burd Guit 18 Marge Park, FL 32065 | | | | | | |
| TO BE BY A P APPLIC | COMPLETED BY APPLICAN PERSON LICENSED PURSUI PANT'S RESPONSIBILITY CD (MM/DD/YY) IF REQUI | NT OR APPLICANT'S ANT TO 489.105(3) TO PROVIDE DOCUM ESTING CONSIDERAT | (m) OR 48: ENTATION (ION OF ST | ED AGENT. SYST 0.552, FLORIDA OF THE DATE THE ATUTORY GRANDFA | EMS MUST BE CONSTRUCTE STATUTES. IT IS THE LOT WAS CREATED OR THER PROVISIONS. | |
| | TY INFORMATION | | | | | |
| LOT: | BLOCK: | SUBDIVISION: | TRIO Pa | N | PLATTED: | |
| PROPERTIES SEWING PROPERTIES DIRECTED PROPERTI | TY SIZE: .S ACRES ER AVAILABLE AS PER 3 TY ADDRESS: .SO S IONS TO PROPERTY: | WATER SUPPLY: 881.0065, FS? [Y DE ANASA ASIO | [] PRIV | DISTAN | | |
| No E | Type of Satablishment | | lding Co | mmercial/Instit ble 1, Chapter | tutional System Design 64E-6, FAC | |
| 1 | Single Family | 15 | 745 | ORIGINAL | ATTACHED | |
| 2 ~ | , , | | | ORIGINAL | ATTACHED | |
| .3 | Proposed Shed | 0 13 | | | | |
| 4 - | | | | | GEOVEN | |
| | Toor/Equipment Drains | s [] Other (| Specify) | 100 | APR 2 5 2022 | |
| | - Instag | | | | Marie Miller | |

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

Page 1 of 4



FIELD BOOK SEE

PAGE(S) FILE

SURVEYOR'S L

I HEREBY CERTIFY THAT THIS SURVEY WAS HABE U TECHNICAL STANDARDS AS SET FORTH BY THE FLOR IN CHAPTER 5J-17, FLORIDA ADMINISTRATIVE CIDE,

7/21/17 FIELD SURVEY DATE

7/26/17

NOTE UNLESS IT BEARS THE SIGNATURE AND THE DRIGH HAPPER THIS BRAVING, SKETCH, PLAT DR HAP IS FOR II