

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

APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO.	21-0278
DATE PAID:	18/25/21
FEE PAID:	6000
RECEIPT #:	1440753

APPLICATION FOR: [ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Abandonment [ ] Temporary [ ] [ ] New System [ ] Repair APPLICANT: Michael Wyatt Roberts TR TELEPHONE: 386-623-1817 MAILING ADDRESS: 320 SW Mabrey 61n Lake City, FL 32024 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: \_\_\_\_\_ BLOCK: \_\_\_\_ SUBDIVISION: \_\_\_\_ PLATTED: PROPERTY ID #: 044516-02772-005 ZONING: I/M OR EQUIVALENT: [ Y / N ] PROPERTY SIZE: 4,4) ACRES WATER SUPPLY: [ ] PRIVATE PUBLIC [ ] <= 2000GPD [ ]>2000GPD IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / N ] DISTANCE TO SEWER: FT PROPERTY ADDRESS: 320 Malirey Gla CC 32034 DIRECTIONS TO PROPERTY: [ ] RESIDENTIAL [ ] COMMERCIAL BUILDING INFORMATION No. of Building Commercial/Institutional System Design Unit Type of Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC No Establishment Workshop - 1,500 11-8778 allack [ ] Floor/Equipment Drains [ ] Other (Specify) SIGNATURE: Michael Roberts DATE: 3/23/21

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ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

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