

## STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM (OSTDS)

PERMIT NO. 24-0370
DATE PAID: 5-9-24
FEE PAID: 60.00
RECEIPT #: 2069953

## APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR: [ ] New System [ ] E [ ] Repair [ ] A	existing System [ bandonment [	] Holding Tank [ ] Temporary [	] Innovative	
APPLICANT: PEGGY HOLM		D. T. C.		CITTON GROUP
AGENT: Jevery TAN	ner	TELEPHON	E: 386-418-000	CGAATL OM
MAILING ADDRESS: 26253	NUS Hwy 27	HIGH SPRINGS, FL	. 32643	
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY T PLATTED (MM/DD/YY) IF REQUES	OR APPLICANT'S AUTHOR T TO 489.105(3)(m) OR O PROVIDE DOCUMENTATION TING CONSIDERATION OF:	IZED AGENT. SYSTEMS 489.552, FLORIDA STAT N OF THE DATE THE LOT STATUTORY GRANDFATHER	MUST BE CONSTRUCT: FUTES. IT IS THE T WAS CREATED OR T PROVISIONS.	ED
PROPERTY INFORMATION	<b>沙山市市 中央市本港河 120 ma 14 ma 16 </b>		TION PLAN? [Y/N	
LOT: BLOCK: S	SUBDIVISION:		PLATTED:	
PROPERTY ID #: 19-65-18	-10621-003 ZONING	: I/M OR EOU	IVALENT: [Y / N ]	
PROPERTY SIZE: 47.2 ACRES				
IS SEWER AVAILABLE AS PER 38	ARIER SUPERIT. ( ) FRI	POBLIC   14m20	100GPD [ 102000GP	9
PROPERTY ADDRESS: 108 5	E TURILE GREAT	LAILE CITY,	FL.	+
DIRECTIONS TO PROPERTY:				+
	•			-
BUILDING INFORMATION	[X] RESIDENTIAL	[ ] COMMERCIAL		
	No of Building	Commandial (Instituti	onal System Desig	n
1 STORAGE BUILDER				
2				
3				
4				
Floor/Equipment Drains	[ ] Other (Specify	,		
TONATURE: DO				
			, ,	The second second
WE 4015, 00-21-2022 (ODS018)	es previous editions w	hich may not be used)		

24-0379

## STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 65100

Plan submitted by:  Approved  Not Approved  Plan Submitted by:  Plan Submitted by:  Not Approved  Plan Submitted by:  Plan	cale:	Each	block	repres	ents 1	0 feet	and t	inch :	= 40 1	feet.											
Plan submitted by: B. Tellung TAnno Approved Not Approved S2 Cland County Health Department  ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT  2 4015, 08-21-2022 (Obsoletes previous editions which may not be used)		1		T	П	T	T	T		T	T	T	T	T	T	T	TT	-	T		_
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## SITE PLAN

Please draw a sketch of the proposed site plan and where you will be needing power. Please include any power poles that are currently nearby. Also, include driveways, septic tanks, wells, buildings, and distances.

Property Owner's Name: Peggy Holman			
Property Size: 47.2 AC			
Tax Parcel Number: 19-6S-18-10621-003			
Setbacks (ft) Front	Sides	Rear	



24-0379

Power lines

Driveway