

Incorporated 64E-6.001, FAC

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

PERMIT NO.	21.	-0	115
DATE PAID:	8	PHS	121
RECEIPT #:	171	68	36

Page 1 of 4

APPLICATION FOR: [X] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary []
APPLICANT: Nicole Newton (Johnson)
AGENT: SAME TELEPHONE: 316.344.4666
MAILING ADDRESS: 724 SE Eloise Avenue, LC 32025
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 #: 30-25-17-04801-D18 zoning: I/M OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 1.90 ACRES WATER SUPPLY: [1] PRIVATE PUBLIC []<=2000GPD []>2000GPD
IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER:FT
PROPERTY ADDRESS: 2970 NW Falling Creek Road, CC 32055
On L.
BUILDING INFORMATION [RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 DWMH 3 1980
2
3
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: Micoli Newton DATE: 8/23/21
DH 4015, 08/09 (Obsoletes previous editions which may not be used)

STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

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Permit Application Number 21-0715

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