

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

PERMIT NO	3-0075
DATE PAID:	127/23
FEE PAID:	64.00
RECEIPT #: }	933656

APPLICATION FOR: [] New System [] F [] Repair [] F	Existing System	() []	Holding Tank Temporary	[] :	Innovative
APPLICANT: Roymond Br					
AGENT:		think and a state of the	TI	ELEPHONE:_	
MAILING ADDRESS: 4479 DV	V County Road	240, L	ake City, FL		
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUAN APPLICANT'S RESPONSIBILITY T PLATTED (MM/DD/YY) IF REQUES	NT TO 489.105(3)(TO PROVIDE DOCUME STING CONSIDERATI	m) OR 48 NTATION ON OF ST	9.552, FLORIDA OF THE DATE TH ATUTORY GRANDE	STATUTES HE LOT WAS PATHER PROV	. IT IS THE CREATED OR VISIONS.
PROPERTY INFORMATION					ME THE STATE AND THE STATE AND ADDRESS OF THE STATE ADDRESS OF THE STATE AND ADDRESS OF THE STATE ADDRESS OF THE STATE AND ADDRESS OF THE STATE ADDRESS OF THE S
LOT: BLOCK:	SUBDIVISION:			PL	ATTED:
PROPERTY ID #: 18-55-16-03	589-018	ZONING:	I/M	OR EQUIVAL	ENT: [Y N
PROPERTY SIZE: 5.63 ACRES	WATER SUPPLY: [X] PRIV	ATE PUBLIC []<=2000G	PD []>2000GPD
IS SEWER AVAILABLE AS PER 38		0			EWER:FT
PROPERTY ADDRESS: 4479 S				29097	
DIRECTIONS TO ENCEUNIZ.	see anachea	*			
BUILDING INFORMATION	[X] RESIDENTI	AL	[] COMMERC	CIAL	
Unit Type of No Establishment	No. of Bui	lding C	Commercial/Instable 1, Chapte	titutional er 64E-6,	System Design FAC
accessory Structure	О Ц	20	or.	tte n	rehad
2				9 40	acres
3		-	Windows and a second a second and a second a		
4	-				
[] Floor/Equipment Drain	s [] Other (Specify)			
SIGNATURE: Ry				DATE: 1/	26/20023

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STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 23-0075

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