

**Mission:**

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



**Vision:** To be the Healthiest State in the Nation

**Ron DeSantis**

Governor

Scott A. Rivkees, MD

State Surgeon General

**APPROVAL FOR NON-RESIDENTIAL ELECTRICAL SERVICE**DATE: 5/8/2025 PERMIT# \_\_\_\_\_OWNER: EUEZIO MIRANDAADDRESS: 8903 NW 171 LANETAX PARCEL ID# 03-65-16-03767-121DIRECTIONS TO PROPERTY: EASTBOUND TURN ON SW SEDGEFIELD LANE  
TO END YOU'LL COME TO FIRST CUL-DE-SAC. PROPERTY  
RECENTLY CLEARED TO YOUR LEFTLEGAL DESCRIPTION: SEE ATTACHEDLEGAL DOCUMENT SHOWING OWNERSHIP OF PROPERTY MUST BE ATTACHEDELECTRICAL SERVICE NEEDED FOR: POLE BARN & WELL

(Please provide a sketch of the property, indicating proposed power location and proposed structures)

I understand that any use of this property, for whatever reason, including mobile homes, houses, campers or tents, that would require sanitary facilities as set forth in Florida Statutes and Florida Administrative Code, is in violation of said rules and regulations until such approved facilities are provided. All violations will be handled in accordance with Florida Law. I further understand the seriousness of my sworn statement as outlined in the following statutes:

- A. Chapter 92.525 F.S. (3) – A person who knowingly makes a false declaration under subsection (2) is guilty of the crime of perjury by false written declaration, a felony of the third degree, punishable as provided in s.775.082, s.775.083, s.775.085.
- B. Chapter 837.06F.S. – False Official Statements. Whoever knowingly makes a false declaration under subsection (2) is guilty of the crime of perjury by false written declaration, a felony of the third degree, punishable as provided in s.775.082, s.775.083 s.775.085.

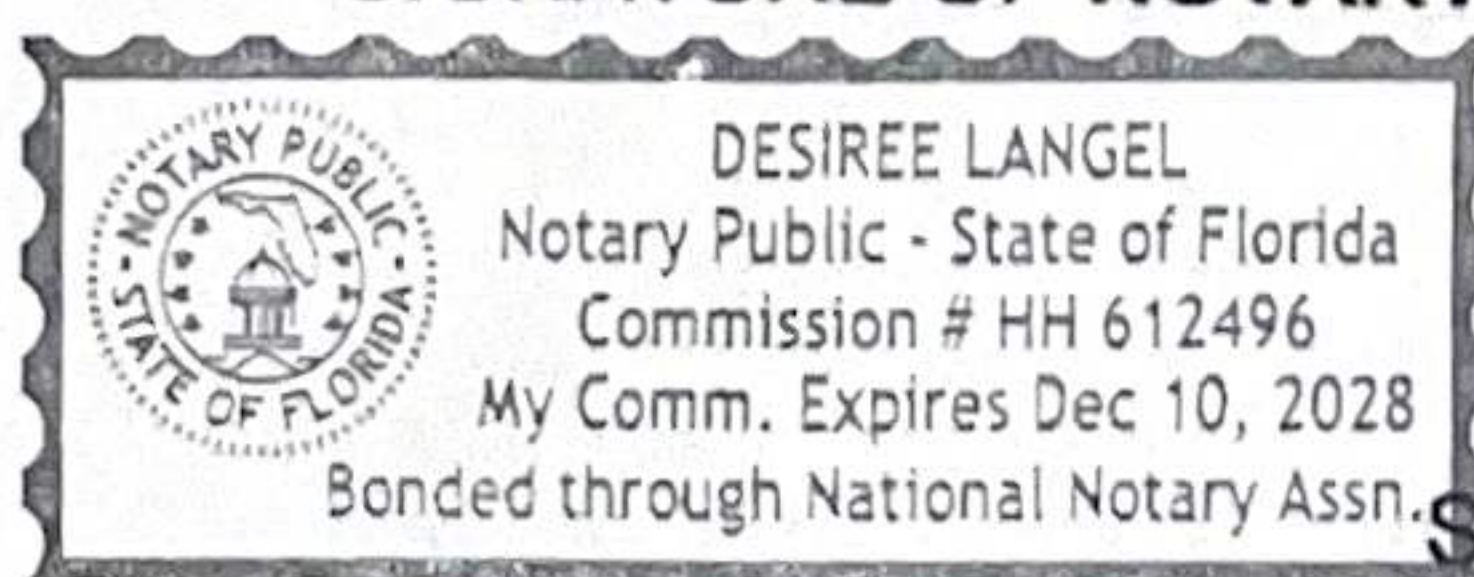
In addition, I understand that the Health Department maintains the right of entry to inspect the proposed usage as set forth in Chapter 381.0065(5) (a), F.S.

SIGNATURE OF OWNER

PHONE #: 786-302-1881Sworn and ascribed before me on this 8 day of May in the year 25.

SIGNATURE OF NOTARY IN INK &amp; SEAL

COMMISSION EXPIRATION DATE



SALLIE FORD, Environmental Manager (DOH-COLUMBIA)

**Florida Department of Health**  
Columbia County Health Department  
217 NE Franklin St., Lake City, FL 32055  
PHONE: 386 758-1068 • FAX 386 758-3900

**Environmental Health**  
135 NE Hernando St., Lake City FL  
Phone: 386-758-1058  
FAX: 386-758-2187

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YOUTUBE: fhdoh