

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

21-0387
4/2/2/
20.00
11057952

APPLIC	CATION FOR:	/								
[ ]	New System [   Repair [	] Ex:	isting Syst andonment	tem	[	]	Holding Ta Temporary	ink [	]	Innovative
APPLIC	ANT: Joan	5. P	arrish							
AGENT :	Terri Walto	WS_		7				TELEPH	ONE :	384-984-0267
MAILIN	ig address: 428	NW 9	Bunish C	t. Lay	le	C	Hs, FI	3205	5	
BY A I APPLIC PLATTE	COMPLETED BY APPLEADING PURCHASED PURCHASED FOR CANT'S RESPONSIBILED (MM/DD/YY) IF RE	RSUANT ITY TO EQUEST:	TO 489.105 PROVIDE DO ING CONSIDE	5(3)(m) C CUMENTAT	R 4	89. OE	552, FLORI	DA STA	TUTE T WA	S. IT IS THE S CREATED OR
	RTY INFORMATION									
LOT: _	BLOCK:	s	UBDIVISION	:					_ F	PLATTED:
	RTY ID #: 20 - 25									
PROPE	RTY SIZE: 0.02 A	CRES 1	WATER SUPPI	rx: [\]	PRI	VAI	E PUBLIC	[ ]<=	2000	GPD [ ]>2000GPD
	VER AVAILABLE AS PI							Committee		
PROPER	RTY ADDRESS: 390	NH	Pourish (	+ la	lie	Ć	Hg, 71	37	053	5
	TIONS TO PROPERTY:									
Cori	who Road to	urn	Dan	Pan	ish		Court.			
					19221					
BUILD	ING INFORMATION		[/] RESI	DENTIAL			[ ] COMME	ERCIAL		
Unit No	Type of Establishment	_	No. of Bedrooms				nmercial/Ir ole 1, Char			al System Design FAC
1	mobile home	_	2	agn						
2	moone nore			100	_		ORIGINA	L ATTA	CHE	D
3					_	_			-	
4			-		_					
						_				
[ ]	Floor/Equipment D		[ ] Oth	er (Spec	rify	) _				11/21/21
SIGNA!	TURE VI WE							DAT	E:	4/21/21

DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC Terri Worlfers \$013@ gmail-Com

## STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number

21-038

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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: 5744-002-4015-5)

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