

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

PERMIT NO.	14-8158E
DATE PAID:	JISIN .
FEE PAID:	12000
RECEIPT #:	Sand
	11273(1

[]	CATION FOR: New System Repair	[X] E	xisting Syst bandonment	tem [1	Holding Ta	mk [))	Innovative
appli	CANT: Dana Gle	nn Brady	č is. os kvisnikosaminim ostorom ostoro	-phi-political and the control of th		· · · · · · · · · · · · · · · · · · ·		·	
agent	: ROCKY FORD, P	& B CON	STRUCTION		Maliferity (e v i		TELEPH	ONE:	386-497-2311
MAILI	NG ADDRESS: 54	6 SW Dort	ch Street, I	FT. WHITE,	FL,	32038	······································	la rap Johnsonson	and the second s
BY A APPLI PLATT	COMPLETED BY A PERSON LICENSES CANT'S RESPONS: ED (MM/DD/YY)	O PURSUAN IBILITY T IF REQUES	T TO 489.105 O PROVIDE DO TING CONSIDI	5(3)(m) OR OCUMENTATI ERATION OF	489 ON C	.552, FLORI F THE DATE TUTORY GRAN	DA STA THE LO IDFATHE	TUTE T WA R PR	s created or ovisions.
	RTY INFORMATION								
LOT:	naBLOCK:	na	SUB: na	n no um a control de la contro		4-1-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		P	LATTED:
PROPE	RTY ID #: <u>02-7</u>	S-16-041	12-001	ZONI	NG:	r/	M OR E	ZO I VŠ	ALENT: [Y /N)
PROPE	RTY SIZE: <u>5.01</u>	ACRES	WATER SUPP	LY: [X] P	RIVA	TE PUBLIC	[]<=	2000	GPD []>2000GPD
IS SE	WER AVAILABLE A	as per 38	1.0065, FS?	[Y / Y]		DI	STANCE	TO S	SEWER: FT
PROPE	RTY ADDRESS: 7	27 SW Hu	gh Loop, Fo	ort White	, FI	., 320 <u>38</u>			
DIREC	TIONS TO PROPE	RTY: 47 S	South, TL o	n US 27,	TL	on Hugh Lo	op (ac	ros	s form Fry)
	TL on drivewa	***************************************	A CONTRACTOR OF THE PARTY OF TH			THE PARTY OF THE P			
Jean again a seasaid a dd a bha	<u> </u>	en Maria de Caración de Caración de Propositivo de La Caración de	erga takasi ata jumpusukan di pengujukukan kerjudu di Adalampa di Adalampa di Adalampa di Adalampa di Pengujuk	ald Vissins (new selections of the second s	- <i>}</i>		······································		
BUILD	ING INFORMATION	7	[> RESII	DENTIAL	**************************************	[] COMM	ERCIAL		
Unit No	Type of Establishment		No. of Bedrooms			ommercial/In			l System Design
NA AND PARTY OF THE PARTY OF TH	der für Carlon Anton och son som in Adala Carlon in St. Ser.	MATERIAL PROPERTY.	400 500 500 500 500 500 500 500 500 500	A pale taken bur very ster v					_
1	SF Resident	ial	3	3242	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	EXISTI	No- E	950	b SQ
2	-			QUANTITY Y		AM		>32	SQ
3						192	bow	32	42 SQ
t N	Floor/Equipmen	nt,Drains	Oti	ne <i>r)</i> (Speci	fy)				
SIGNA	TURE: 100	LAN	and framework the state of the				DA'	TE:	3/12/2014
		1					-		A A Milaton and A Alba arrypyou

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

Permit Application Number_ - PART II - SITEPLAN - - - - -120 Scale: 1 inch = 40 feet. 130 DROD 210 90 90 100 130 Notes: Site Plan submitted by MASTER CONTRACTOR PREMISSIVED Not Approved Date 3119/14 County Health Department By_ THANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT