



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

PERMIT NO.	31-2811
DATE PAID: EEE PAID:	310.00
RECEIPT #:	1735384

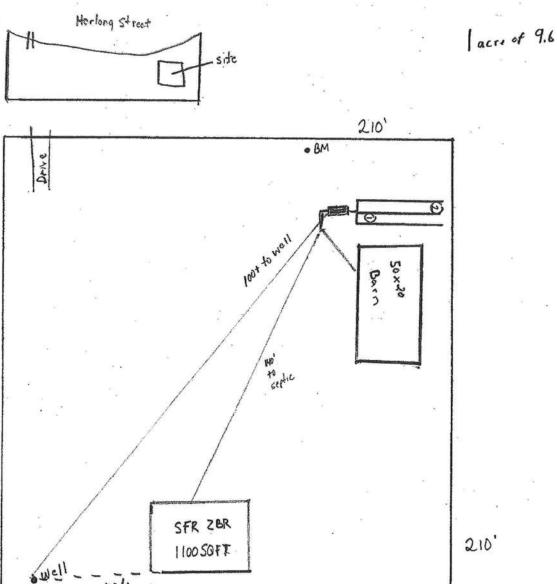
	CATION FOR: New System Repair]]]	Existing Sys Abandonment	tem]]	Holding Tar Temporary	nk []	Innovative
APPLI	CANT: Millard	and Step	hanie	Blanchard							
AGENT	: Randy Howard	<u>d</u>		****					FELEPH	ONE	: 590-4884
MAILI	NG ADDRESS:	22693	CR 49	Obrien FL							
TO BE BY A APPLI PLATT	COMPLETED E PERSON LICEN CANT'S RESPO ED (MM/DD/YY	SY APPI ISED PI INSIBI () IF I	LICAN URSU/ LITY REQU	IT OR APPLICA NT TO 489.10 TO PROVIDE D STING CONSID	NT'S AUTH 5(3)(m) O OCUMENTAT ERATION O	OR R IO F	IZE 489 N O STA	D AGENT. SY 0.552, FLORID F THE DATE T TUTORY GRAND	STEMS A STATE THE LOTE OFATHE	MUS TUTE T WA	ST BE CONSTRUCTED ES. IT IS THE AS CREATED OR ROVISIONS.
	RTY INFORMAT										
LOT:	BL00	CK:		SUBDIVISION	l:			#B 40 1, 1 4 1		_ F	PLATTED:
PROPE	RTY ID #: 07	-6S-17-0	09621-	204	ZON:	IN	B: .	I/M	OR EQ	UIV	ALENT: [No 💌]
IS SE PROPE	WER AVAILABL	.E AS I	PER 3	881.0065, FS?	[No 🚾 Vhite]		DIS	TANCE	то	SEWER:FT erlong Street. Site on left
BUILD	ING INFORMAT	TON		[RESI	DENTIAL			[] COMMER	CIAL		
Unit No	Type of Establishme	nt		No. of Bedrooms	Building Area Sqf		Co Ta	mmercial/Ins ble 1, Chapt	titut: er 64	ona -6,	al System Design FAC
1	SFR				1100	_	-				
2	Bam	artes	ally	0	1000	_					-
3											
4											
[]	Floor/Equip	ment t	orain H	s [] Oth	ner (Speci	ify	/) -	ama kanina AAA na kiri usu ahu ayi astangii			.0/2/2021
DH 40:	15, 08/09 (0	bsolet	es p	revious edit	ions which	h r	nay	not be used)	e-8 1:	

Incorporated 64E-6.001, FAC

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