

# 550 173205 884



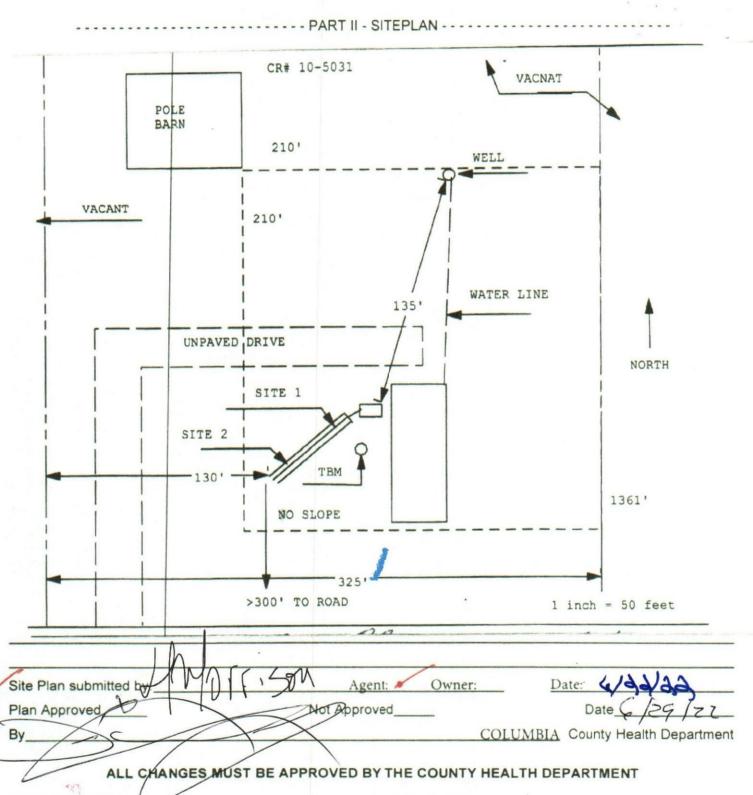
STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO.	22-1	054	
DATE PAID:	1	173	122
FEE PAID:	-4	15.00	+
RECEIPT #:	185	377	4

	[ ] Existing System [ ] Holding Tank [ ] Innovative [ ] Abandonment [ ] Temporary [ ]
APPLICANT: E	resto Caballero
1000	TELEPHONE: (386) 989.9357
	313 NW Brook loop, Cake City, F1, 32055 heidemornison@gmail.com
BY A PERSON LICENS APPLICANT'S RESPON PLATTED (MM/DD/YY)	APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED ED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE SIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.
PROPERTY INFORMATI	ON
	: SUBDIVISION: Cross Roads PLATTED:
	-65-16-03816-125 ZONING: I/M OR EQUIVALENT: [ Y/N ]
PROPERTY SIZE:	ACRES WATER SUPPLY: [ PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD
	AS PER 381.0065, FS? [ Y N ] DISTANCE TO SEWER: 135 FT
PROPERTY ADDRESS:	333 SW Scott Gla
DIRECTIONS TO PRO	PERTY: Turn (D) on to NW main Blud, Keep@ onto SP475
TurnBonto	sw walter Ave, Turn Don to sw Scar Glen, Destination
is on your	(b)
BUILDING INFORMAT	ON [ RESIDENTIAL [ ] COMMERCIAL
Unit Type of No Establishme	No. of Building Commercial/Institutional System Design  Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 Establishme	
2	
3	
4	
[ ] Floor/Equip	ment Drains [ ] Other (Specify)
SIGNATURE:	Juforn'son DATE: 06/22/22

# STATE OF FLORIDA DEPARTMENT OF HEALTH APPLICATION FOR CONSTRUCTION PERMIT





DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-002-4015-6)

Page 2 of 4

Mobile Home Floor Plan Foxwood by Fairmont Floor Plans

Page 1 of 1

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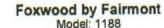
List of: **Fairmont Homes** 

list of 2 Section, 4 Bed, 3 **Bath Homes** 

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## **Mobile Home** Insurance

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32' X 80', 2341 Sq. Ft., 4 Beds, 3 Bath

[Original View] 1st Variation

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ub: Garden

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