

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

PERMIT NO.	20-0475
DATE PAID:	Ce11220
FEE PAID:	00.00
RECEIPT #:	1510417

THE LEGISLE			
APPLICATION FOR:  [ ] New System [ √ ] Ex  [ ] Repair [ ] Ab	cisting System	[ ] Holding Tank [ ] Temporary	[ ] Innovative
APPLICANT: Zachary Spradley			
AGENT: Dale Burd / Dale Burd LLC		TELE	PHONE: 386-365-7674
MAILING ADDRESS: 20619 County R			
TO BE COMPLETED BY APPLICANT BY A PERSON LICENSED PURSUANT APPLICANT'S RESPONSIBILITY TO PLATTED (MM/DD/YY) IF REQUEST	OR APPLICANT'S AUT T TO 489.105(3)(m) PROVIDE DOCUMENTA TING CONSIDERATION	HORIZED AGENT. SYSTEM OR 489.552, FLORIDA S' TION OF THE DATE THE OF STATUTORY GRANDFAT	MS MUST BE CONSTRUCTED TATUTES. IT IS THE LOT WAS CREATED OR HER PROVISIONS.
PROPERTY INFORMATION			
LOT: NA BLOCK: NA	SUBDIVISION: NA		PLATTED: NA
PROPERTY ID #: 20-2S-17-04740-00	)i zo	NING: na I/M OR	equivalent: [ No ]
PROPERTY SIZE: 2 ACRES	WATER SUPPLY: [ ✓ ]	PRIVATE PUBLIC [ ]	<=2000GPD [ ]>2000GPD
IS SEWER AVAILABLE AS PER 38			CE TO SEWER: na FT
PROPERTY ADDRESS: 8144 N US Hw	vy 441, Lake City, FL. 3205	5	
DIRECTIONS TO PROPERTY: US 44	11 North, Approx 43 miles	to address on left	
BUILDING INFORMATION	[ ✓ ] RESIDENTIAL	[ ] COMMERCIA	L
No Establishment		ng Commercial/Instit	cutional System Design 64E-6, FAC
1 SF Residential	3 1760	3 BR for 3 BR Like for L	ike
2			
3			
4			
[ ] Floor/Equipment Drains	[ ] Other (Spe	cify)	
-11			

DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6.001, FAC

## STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 20.0475

Scale: 1 inch = 40 feet.

Prince Sin Attacks

Notes:

Site Plan submitted by:

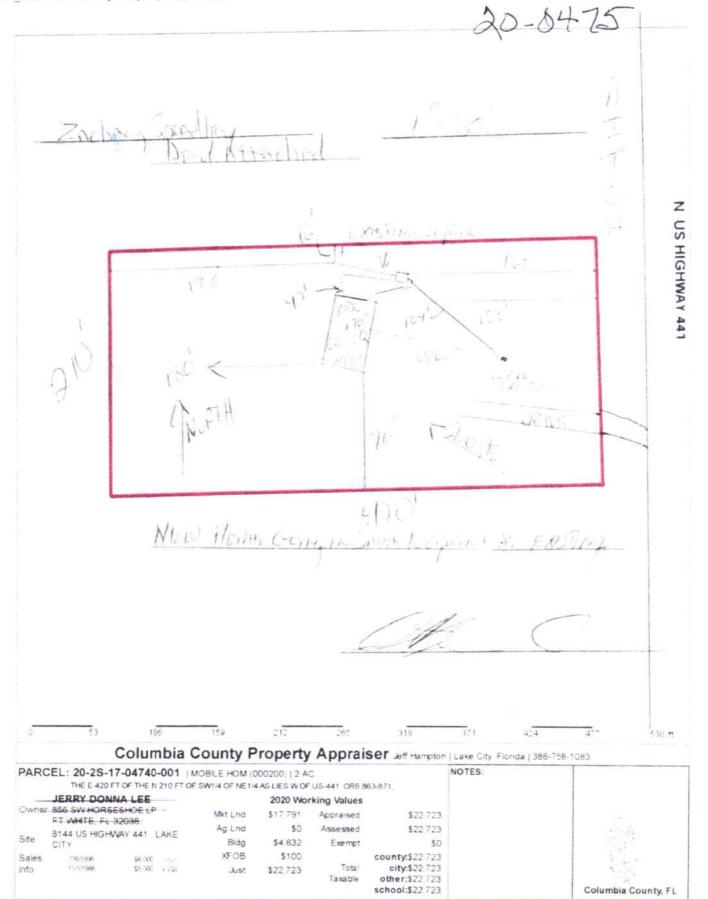
Plan Approved

Not Approved

Date 6/18/20

By County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



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\*\*Critical Contraction\*\*

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