



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

PERMIT NO.	28-2	151	2
DATE PAID:	16	35	80
RECEIPT #:/	51	299	83

APPLICATION FOR: [] New System [] Exi [] Repair [] Aba				
ADPLICANT: Betty Federic AGENT: MAILING ADDRESS: 1217 Lowe			TEL	EPHONE: 334-429-6445
TO BE COMPLETED BY APPLICANT OF A PERSON LICENSED PURSUANT APPLICANT'S RESPONSIBILITY TO	OR APPLICANT'S TO 489.105(3)() PROVIDE DOCUME. TO CONSIDERATI	AUTHORIZ m) OR 48 NTATION ON OF ST	ED AGENT. SYST 19.552, FLORIDA OF THE DATE THE CATUTORY GRANDFA	EMS MUST BE CONSTRUCTED STATUTES. IT IS THE LOT WAS CREATED OR THER PROVISIONS.
PROPERTY INFORMATION LOT: BLOCK: SI				
PROPERTY ID #: 34-25-15-00 PROPERTY SIZE: 1.4 ACRES IN IS SEWER AVAILABLE AS PER 381 PROPERTY ADDRESS: 1217 Lower DIRECTIONS TO PROPERTY: See	water supply: [.0065, FS? [Y r Springs ed.	/ N] Lake	DISTA]<=2000GPD []>2000GPD NCE TO SEWER:FT
BUILDING INFORMATION	[] RESIDENT	IAL	[] COMMERC	IAL
Unit Type of No Establishment				itutional System Design r 64E-6, FAC
Single Family 30 x 60 Accessory Stru	18			
[] Floor/Equipment Drains	[] Other	(Specify)	
SIGNATURE: BOUY Federico				DATE: 6/26/2020

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 CONSTRUCTION PERMIT

Permit Application Number 25-25/2

----- PART II - SITEPLAN ------Notes: _ See Attached Site Plan submitted by: Betty Federico Not Approved_ Plan Approved_ County Health Department Ву. ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT DH 4015, 09/09 (Obsoletes pravious editions which may not be used) Incorporated: 64E-6.001, FAC (Stock Number: 5744-902-4015-6)

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