

CR # 10-7652

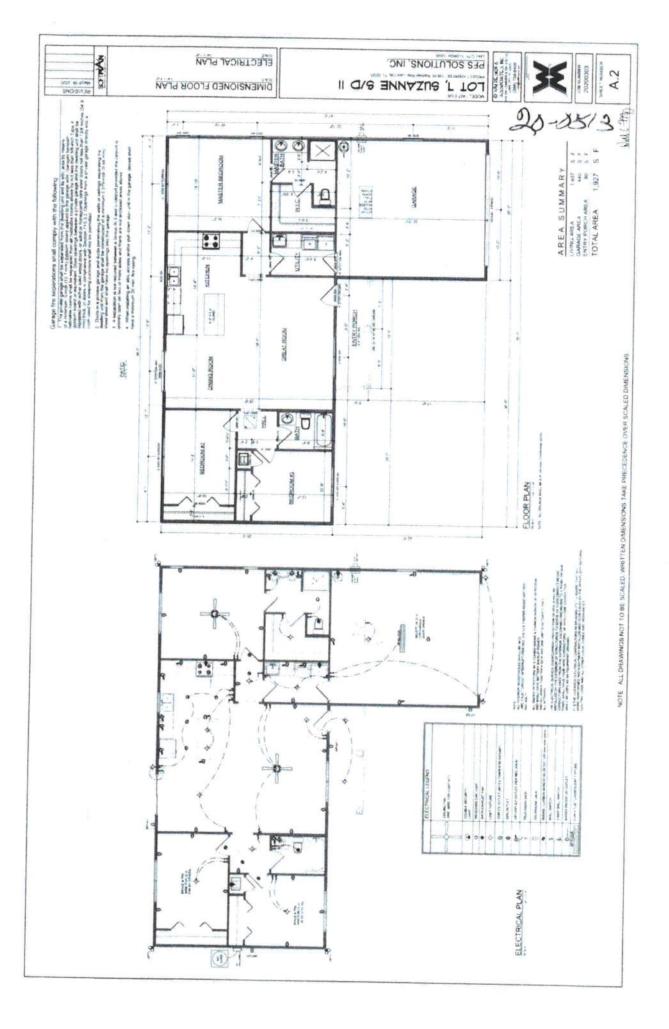


STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM

| | - | | 1 |
|------------|----|-----|-----|
| | 20 | -05 | 5/3 |
| DATE PAID: | 1 | 35 | 120 |
| FEE PAID: | 31 | 0.0 | 33 |
| RECEIPT #: | 15 | 130 | 03 |

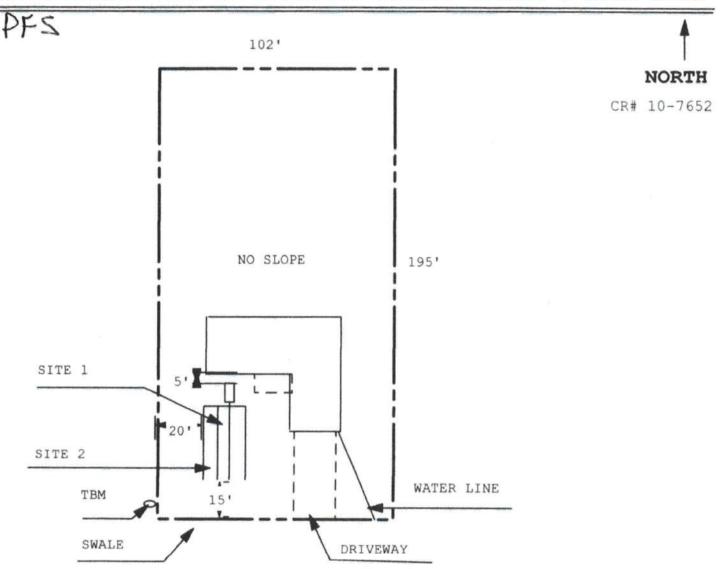
| SYSTEM | | | | RECEIPT | #: 151300 |
|--|--|---------------------------|--|-----------|--------------------------------|
| APPLICATION FOR: [X] New System [[] Repair [| ON FOR CONST: Existing System Abandonment | | | ık [] | Innovative |
| APPLICANT: PFS SOLUTION | IS INC. | | | | |
| AGENT: ROBERT STEWART | | | r | ELEPHONE: | (386) 867-2059 |
| MAILING ADDRESS: PO BOX | 1831 | | LAKE | YTI | FL 32056 |
| TO BE COMPLETED BY APPL BY A PERSON LICENSED PU APPLICANT'S RESPONSIBIL PLATTED (MM/DD/YY) IF R | RSUANT TO 489.10 ITY TO PROVIDE D | 05(3)(m) OR OCUMENTATI | 489.552, FLORIS | DA STATUT | ES. IT IS THE AS CREATED OR |
| PROPERTY INFORMATION | | | | | |
| LOT: 7 BLOCK: N | A SUBDIVISION | N: SUZANNE | SID Wa | 1 | PLATTED: |
| PROPERTY ID #: 03-4S-17-0 | 7570-041 | ZONIN | IG: RES I/M | OR EQUIV | ALENT: [NO] |
| PROPERTY SIZE: 0.460 A | CRES WATER SUPP | LY: [] P | RIVATE PUBLIC |]<=200 | OGPD [X]>2000GPD |
| IS SEWER AVAILABLE AS P | ER 381.0065, FS? | [00] | DIS | FANCE TO | SEWER: N/A FT |
| PROPERTY ADDRESS: 139 RA | CHEL WAY LAKE C | ITY | | | |
| DIRECTIONS TO PROPERTY: | | | 100. TURN RIGHT (GHT AT FORK, TURI | | |
| BUILDING INFORMATION | [X] RESIDENTIAL | r [] coi | MERCIAL | | |
| Unit Type of No. Establishment | No. of Bedrooms | | Commercial/Inst | | l System Design FAC |
| 1 HOUSE | 3 | 1,407 | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| [] Floor/Equipment Dr | rains) Other | (Specify) | | | , |
| SIGNATURE: | The | | | DATE: | 6/17/2020 |

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



Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: 20-0513

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



NO WELLS WITHIN 100' 1 INCH = 40 FEET

| ite 1 | Plan Submitted | By Ford Ro | Date | 6/17/20 |
|-------|----------------|--------------|-------------|---------|
| lan l | Approved | Not Approved | Date 7/1/20 | 20 |
| Y | Kell Rox | | Columbia | СРНО |
| otes | : | | | |