

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

PERMIT NO.	20-0395
DATE PAID:	5/2/0/20
FEE PAID: RECEIPT #:	1506353

APPLICATION FOR: [New System [] [] Repair []	Existing System Abandonment	1 1	Holding Tank Temporary	[] Innovat	ive
APPLICANT: Brandon Stalvey					
AGENT: ROCKY FORD, A & B CO	NSTRUCTION		TE	LEPHONE: 386-497	7-2311
MAILING ADDRESS: 546 SW Dor	etch Street, FT.	WHITE, F	5, 32038		
TO BE COMPLETED BY APPLICAN BY A PERSON LICENSED PURSUA APPLICANT'S RESPONSIBILITY PLATTED (MM/DD/YY) IF REQUE	TO PROVIDE DOCUM	(m) OR 48	89.552, FLORIDA OF THE DATE TH	STATUTES. IT I	IS THE ED OR
PROPERTY INFORMATION					
LOT: NA BLOCK: NA	SUB: NA			PLATTED:	
PROPERTY ID #: 11-5S-17-09	9205-004	ZONING:	I/M (OR EQUIVALENT: [Y / N]
PROPERTY SIZE: 58.53 ACRES	WATER SUPPLY:	[] PRI	VATE PUBLIC []<=2000GPD [])>2000GPD
IS SEWER AVAILABLE AS PER 3				ANCE TO SEWER:	
PROPERTY ADDRESS: S	E Webley Dr La	ke City	FL		
DIRECTIONS TO PROPERTY: So	outh Left on Ga	be St Ri	ght on Weeble	y Ct to gat at	end)
on Right (gate code 1081					
BUILDING INFORMATION	[X] RESIDEN	TIAL	[] COMMERC	IAL	
Unit Type of No Establishment	No. of Bu Bedrooms Ar	ilding (Commercial/Inst Table 1, Chapte	itutional System r 64E-6, FAC	n Design
1	3 6	370			
SF Residential2	<u> </u>	10/0			
3		-			
[] Floor/Equipment Drain	as [] Other	(Specify)			
SIGNATURE: Signature:	ishof It			DATE: 5/22/2020	0

STATE OF FLORIDA DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT Permit Application Number_ ---- PART II - SITEPLAN ------Scale: 1 inch = 40 feet. 102 M 3 BR 2370 57717 94' DRIVE Notes: Site Plan submitted by: MASTER CONTRACTOR

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Not Approved

Plan Approved

Date 5-22

County Health Department