

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT**

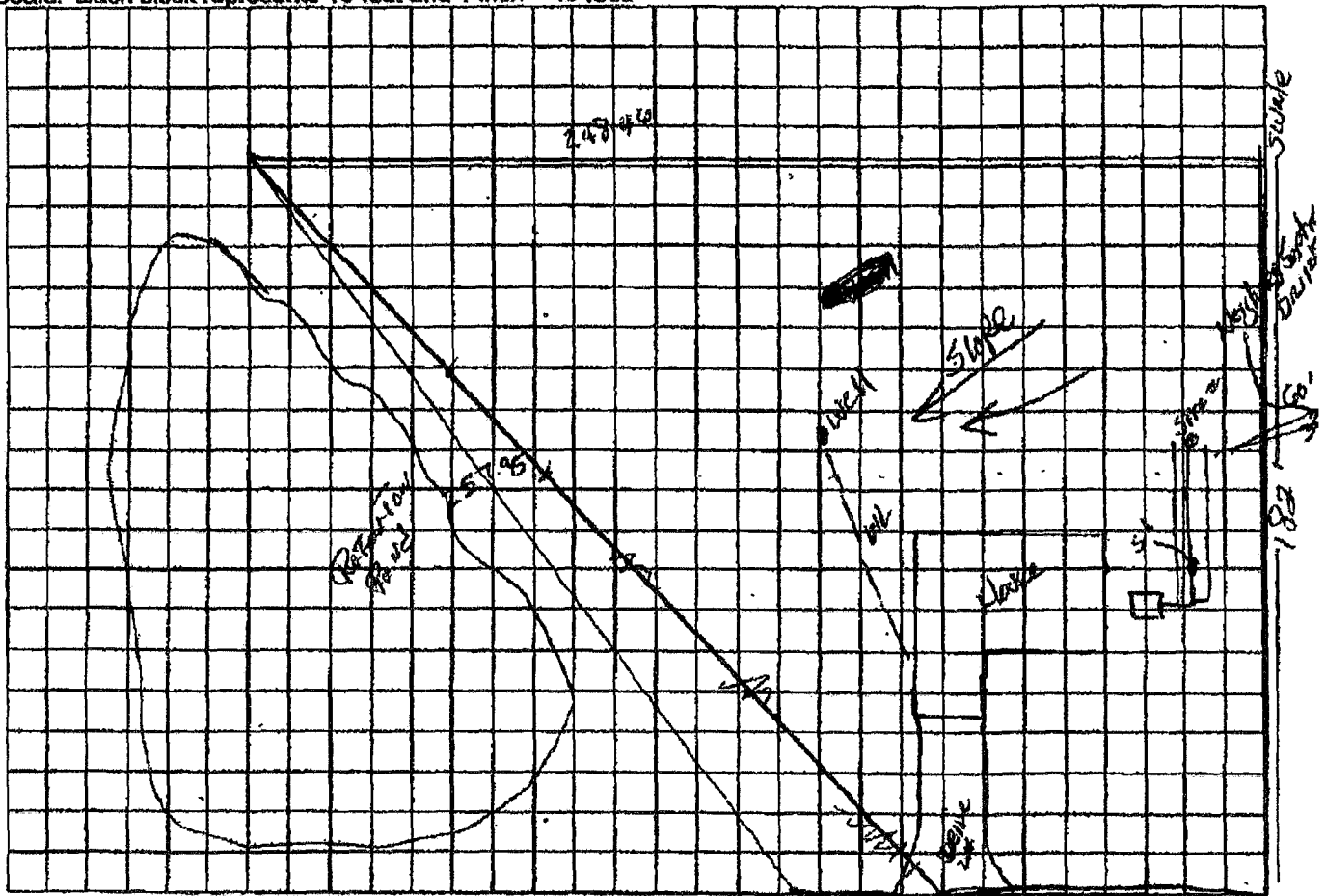
Permit Application Number:

Peter Giebeig

PART II - SITEPLAN

11-45-14-02911-308

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: TREAT GRABER'S
LOT 8 MAYBEE UNIT III
0.720 ACRES 02911-308

Site Plan submitted by: Robert W. Jahn 12/3/13

Plan Approved ☒ Not Approved ☐

By Willi Lord Environmental Director Columbia

Agent

Date 12.15.13

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL
SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 13-0624
DATE PAID: 12/16/13
FEE PAID: 310.00
RECEIPT #: 112450

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Trent Gieberg (Peter Gieberg)AGENT: Robert Ford North Florida Septic TELEPHONE: 955-6372MAILING ADDRESS: 580 NW Guerdon St LIC FL 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(a) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: B UNIT: 3 SUBDIVISION: May Fair PLATTED: 1978

PROPERTY ID #: 02911-308 ZONING: SF I/M OR EQUIVALENT: ☒ (N)

PROPERTY SIZE: 0.720 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, ES? ☒ (N) DISTANCE TO SEWER: NR FT

PROPERTY ADDRESS: PO BOX 1384 LAKE CITY FL 32050 257 SW VANU CT.

DIRECTIONS TO PROPERTY: Hwy 90 West to Hwy 242 TL Follow to Mayfair TR Follow to VANU CT TR At END on Right

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No. Type of Establishment No. of Bedrooms Building Area Sqft Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC

1	<u>S/F House</u>	<u>3</u>	<u>1100</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Robert W Ford DATE: 12/3/13