



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

PERMIT NO. 22-0550
DATE PAID: 6/21/22
FEE PAID: 60.00
RECEIPT #: 1853124

APPLICATION FOR:

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

APPLICANT: Dennis T Hansen

AGENT:

TELEPHONE: 208-681-0362

MAILING ADDRESS: 319 SE Andrews Dr. Lak City Fl. 32025

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) 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: 4 BLOCK: _____ SUBDIVISION: Price Creek UNR PLATTED: _____

PROPERTY ID #: 14-45-17-08346-050 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 1.09 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 319 SE Andrews Dr. Lak City Fl. 32025

DIRECTIONS TO PROPERTY: _____

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>single family</u>	<u>3</u>	<u>1958</u>	<u>PTH</u>
2	<u>Storage Bldg</u>	<u>-</u>	<u>624</u>	<u>Built 1973</u>
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

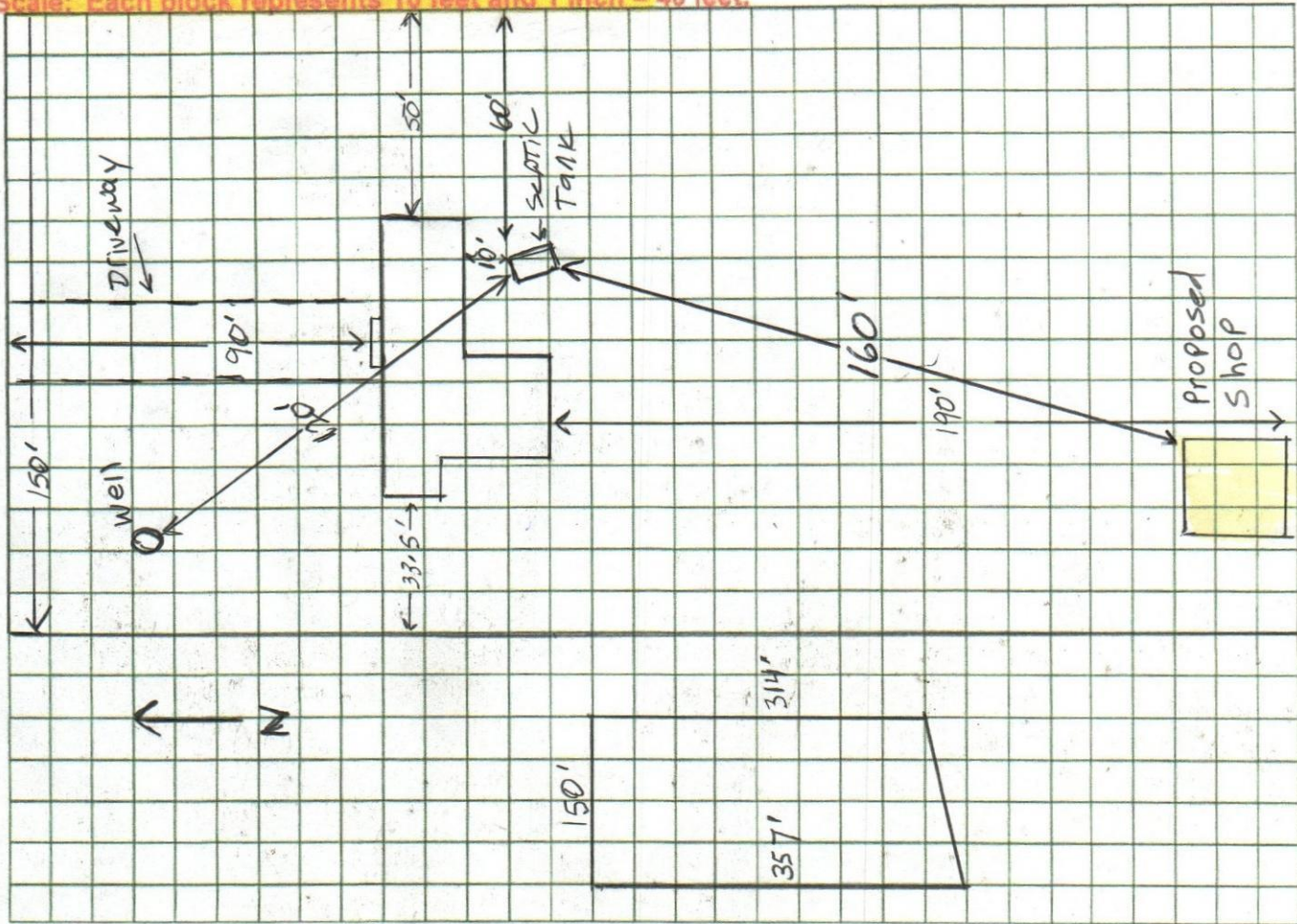
SIGNATURE: Dennis T Hansen DATE: 06/17/22

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----- PART II - SITEPLAN -----

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



Notes: _____

Site Plan submitted by: Dennis & Nant Agent: _____ Owner: X Date: 06/17/22
Plan Approved X Not Approved _____ Date 6/28/22
By _____ COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT