



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

PERMIT NO. 21-0150
DATE PAID: 2/16/21
FEE PAID: 1681.00
RECEIPT #: 1438885

APPLICATION FOR:

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

APPLICANT: Trent Gieberg George Smith Jr
AGENT: Trent Gieberg TELEPHONE: 397-0545
MAILING ADDRESS: 697 SE Holly Terrace

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: 37+38 BLOCK: 11-45-16 SUBDIVISION: Mayfair K-3 PLATTED:

PROPERTY ID #: 02911-337 ZONING: I/M OR EQUIVALENT: ☒ Y ☐ N

PROPERTY SIZE: 1.02 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: FT

PROPERTY ADDRESS: 559 SW Mayfair Ln 32014

DIRECTIONS TO PROPERTY: 247 South -1

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
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1	<u>add detached garage</u>	<u>520 sq ft</u>	<u>ORIGINAL ATTACHED</u>
2			
3			
4			

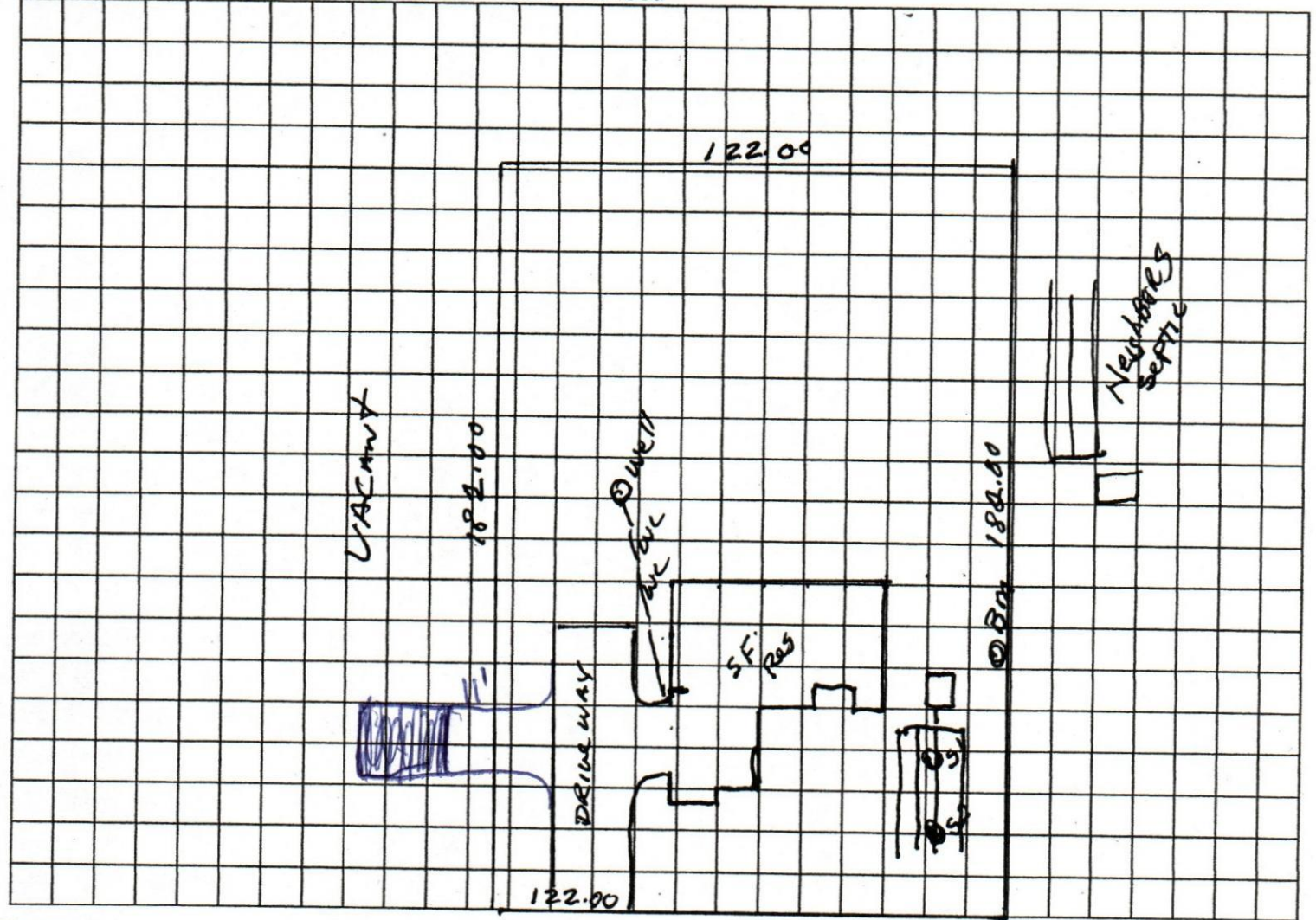
☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: [Signature] DATE: 2-16-21

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



Notes: SW MAY-FAIR LANE
MAYFAIR Lot # 37 UNIT 3 Owner owns both lots
TOTAL 0.51 ACRES

Site Plan submitted by: [Signature] Owner
 Plan Approved [Signature] Not Approved _____ Date 2/1/20
 By [Signature] [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

