



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

PERMIT NO. 20-0484
DATE PAID: 6/18/20
FEE PAID: 3181.20
RECEIPT #: 1510425

APPLICATION FOR:

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

APPLICANT: MATTHEW SORENSEN (TRENT GEIBIEG)

AGENT: North Florida Septic Tank Inc; TELEPHONE: 386-755-6372

MAILING ADDRESS: 741 SE State Road 100 Lake City, Fla 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: 31 BLOCK: NA SUBDIVISION: CANNON PLACE ^{Creek} PLATTED: _____

PROPERTY ID #: 24-4S-16-03114-131 ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: .56 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [No] DISTANCE TO SEWER: NA FT

PROPERTY ADDRESS: 334 ARROWBEND DR

DIRECTIONS TO PROPERTY: 90 west to Sister Welcome Rd +/L to Kicklighter Rd
+/L to Gerald Conner Dr. +/R to Arrow Bend Dr. +/L to end on (E)

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 | NEW HOME | 3 | 2205 total | |
| 2 | | | H/C 1423 | |
| 3 | | | | |
| 4 | | | | |

☐ Floor/Equipment Drains ☐ Other (Specify) _____

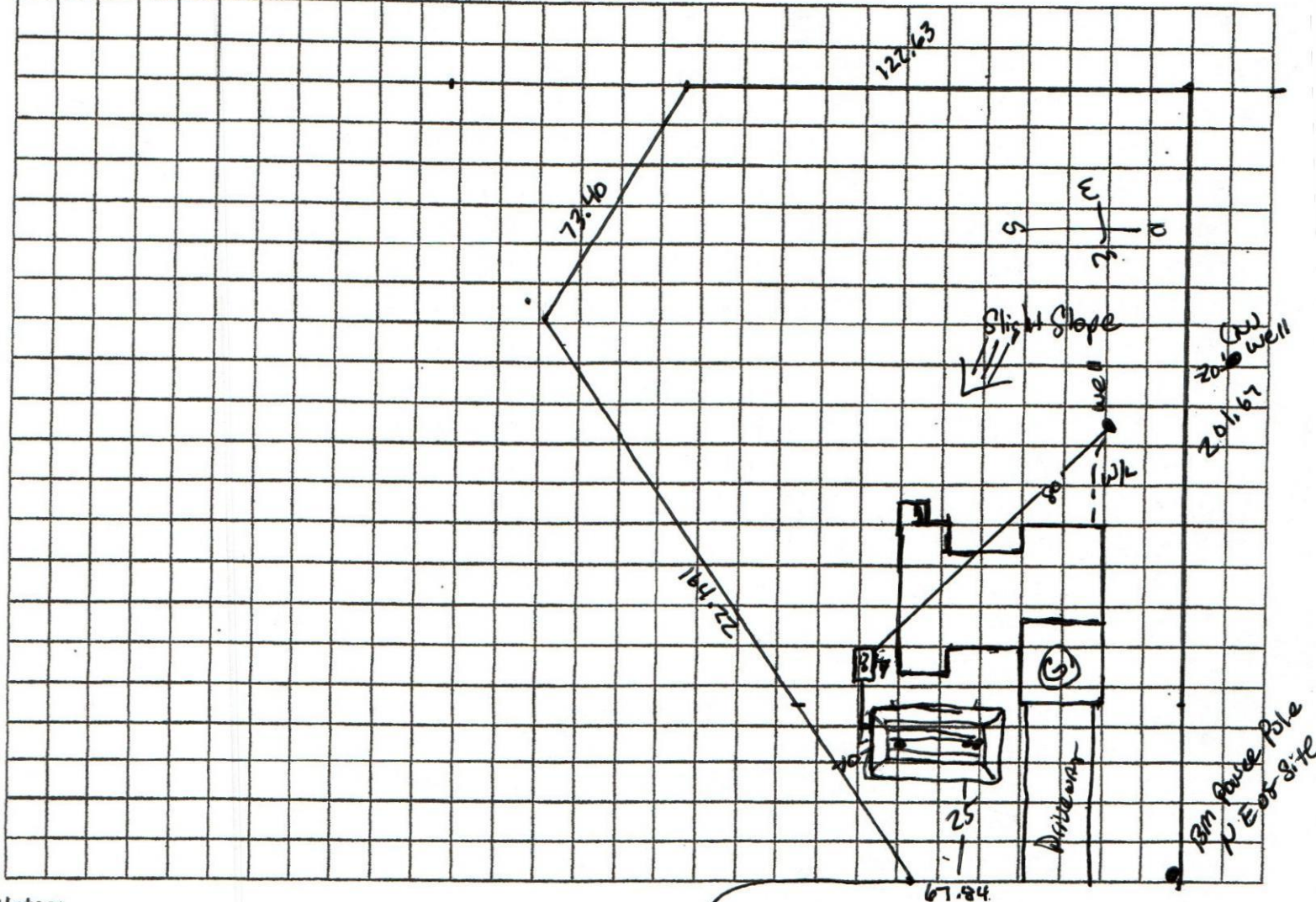
SIGNATURE: William D. Bishop II DATE: 6/17/2020

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Permit Application Number 20 0484

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

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



Notes: _____

Arrow Bend Dr.

William D. Bishop II

Site Plan submitted by: Robert W. Ford III DATE 6/11/2020

Plan Approved ☒ Not Approved ☐

Date 6/19/2020

By Kelli Rogers Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT