



STATE OF FLORIDA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
ONSITE SEWAGE TREATMENT AND DISPOSAL  
SYSTEM (OSTDS)

PERMIT NO. 26-0389  
DATE PAID: 4.27.26  
FEE PAID: \$60  
RECEIPT #: 2302518

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

- New System     Existing System     Holding Tank     Innovative  
 Repair     Abandonment     Temporary

APPLICANT: Williams Southern Renovations LLC    EMAIL: awill12@icloud.com

AGENT: N/A    TELEPHONE: 310-503-9498

MAILING ADDRESS: 141 NW Springhollow Blvd Lake City 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)(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

OSTDS REMEDIATION PLAN? [ Y / N ]

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: Woodcrest PLATTED: \_\_\_\_\_

PROPERTY ID #: 02905-31212036 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: .5 ACRES WATER SUPPLY: [ ] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

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

PROPERTY ADDRESS: 218 SW woodnew way, Lake City, FL 32055

DIRECTIONS TO PROPERTY: S.E on 247 to Woodcrest Dr

BUILDING INFORMATION

[ ] RESIDENTIAL    [ ] COMMERCIAL

Unit No.	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table I, Chapter 62-6, FAC
1	Power	3	1599	
2				
3				
4				

[ ] Floor/Equipment Drains    [ ] Other (Specify) \_\_\_\_\_

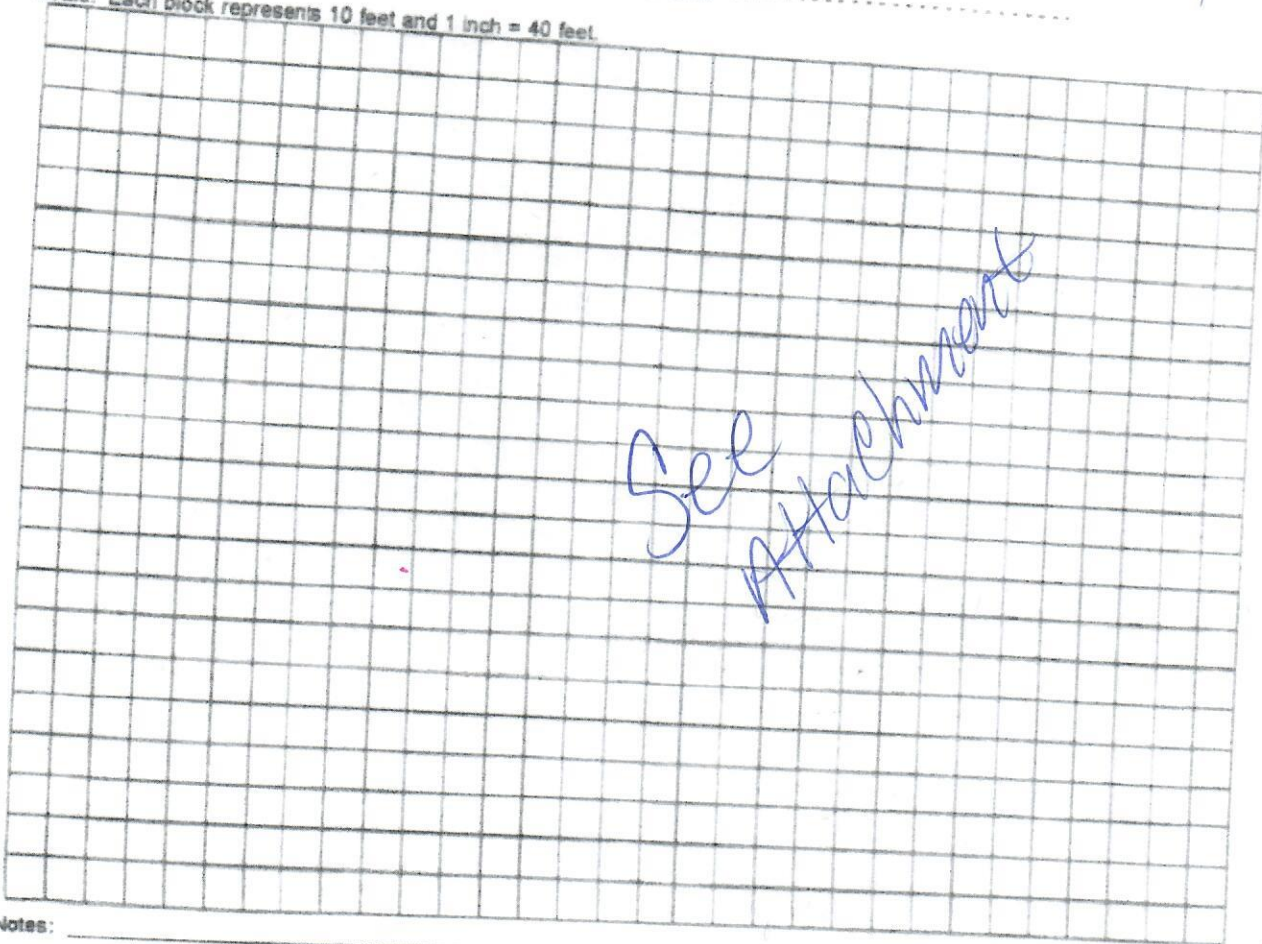
SIGNATURE: \_\_\_\_\_ DATE: 4/27/26

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Permit Application Number 26-0389

PART II - SITEPLAN

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



Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Site Plan submitted by: \_\_\_\_\_

Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_

By [Signature] \_\_\_\_\_ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

4/27/26

Approved  
by

[Signature]

ESZ 5/1/26  
Columbian

26-0389

OSTDS Application for Construction (New System) Page # 2

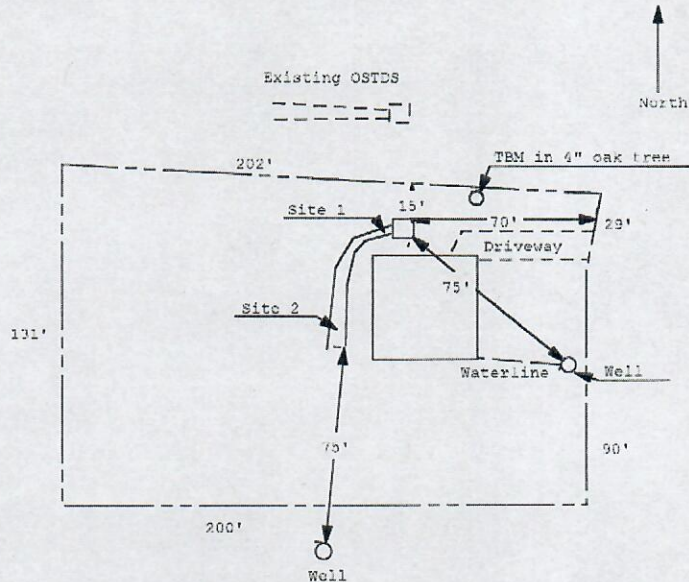


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- Close Window

**Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan**  
 Permit Application Number: 99-0948-N

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT**

GIEBING/CR 99-6517



Woodcrest Phase II, Lot 12

1 inch = 40 feet

Site Plan Submitted By Paul Lloyd Date 11/10/99  
 Plan Approved Not Approved Date 11/10/99  
 By Paul Lloyd 11-16-99 Col. L. L. Smith CPHU  
 Notes: \_\_\_\_\_

original