



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

PERMIT NO. 25-06-84
DATE PAID: 7/24/25
FEE PAID: 200.00
RECEIPT #: 2241253

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

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

APPLICANT: Olisa Properties LLC EMAIL: provisionpermitting@gmail.com

AGENT: Sonya North 803-517-5701 TELEPHONE: 386-365-7090

MAILING ADDRESS: 212 SW Cottage Glen Lake City FL 32024

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: 7 CK: SUBDIVISION: Pine Needle Est PLATTED:

PROPERTY ID #: 20-35-17-05249-007 ZONING: I/M OR EQUIVALENT: ☐ Y ☐ N

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

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

PROPERTY ADDRESS: 197 NE Windall Ln Lake City FL

DIRECTIONS TO PROPERTY: Turn L on NE Madison, Turn R on N Marion, Turn R on NE Windall, property on L

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	mobile Home	2	830	<u>Design attached</u>
2	old mH	2	830	
3	old mH	3	1040	
4				

☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: Sonya North DATE: 7/22/25

Permit Application Number.

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

This image shows a full page of blank graph paper. The grid consists of small squares formed by thin black lines. There are approximately 20 columns and 20 rows of squares. A faint vertical line runs down the center of the page, dividing it into two equal halves. The paper has a slightly off-white or cream color.

Notes: _____

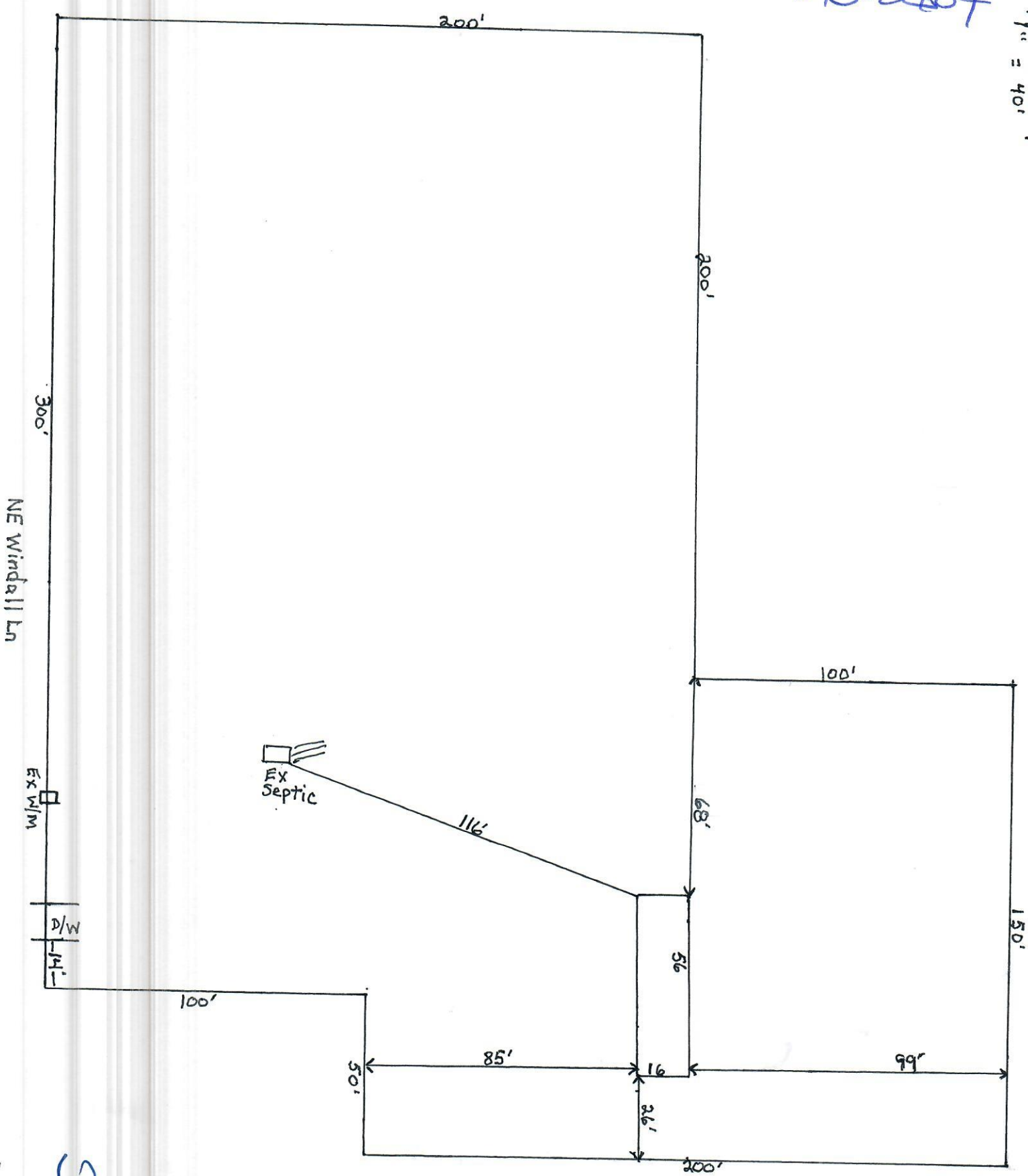
Site Plan submitted by: Song & North

Plan Approved ✓ Not Approved _____ Date 7/25/25
By [Signature] Columbiana County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

25.0004

1" = 40'



CONDA
Morrell