



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

PERMIT NO. 25-1861
DATE PAID: 10/21/25
FEE PAID: 265.00
RECEIPT #: 275200

APPLICATION FOR CONSTRUCTION PERMIT

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary

APPLICANT: Michael Davis

EMAIL: msddav.s@hotmail.com

AGENT: _____

TELEPHONE: 386-984-6054

MAILING ADDRESS: 135 NW Windy Pl 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: 35 BLOCK: - SUBDIVISION: Emerald Lakes PLATTED: 2000

PROPERTY ID #: 28-35-16-02372-135 ZONING: SF I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: .51 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

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

PROPERTY ADDRESS: 135 NW Windy Pl Lake City, FL 32055

DIRECTIONS TO PROPERTY: 90W to Brown Rd, TR to Windy Pl TL
On 2nd CR 135

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	Pool House	0	660	
2				
3				
4				

Floor/Equipment Drains Other (Specify) _____

SIGNATURE: _____

DATE: 24 OCT 25

DEP 4015, 06-21-2022 (obsoletes previous editions which may not be used)

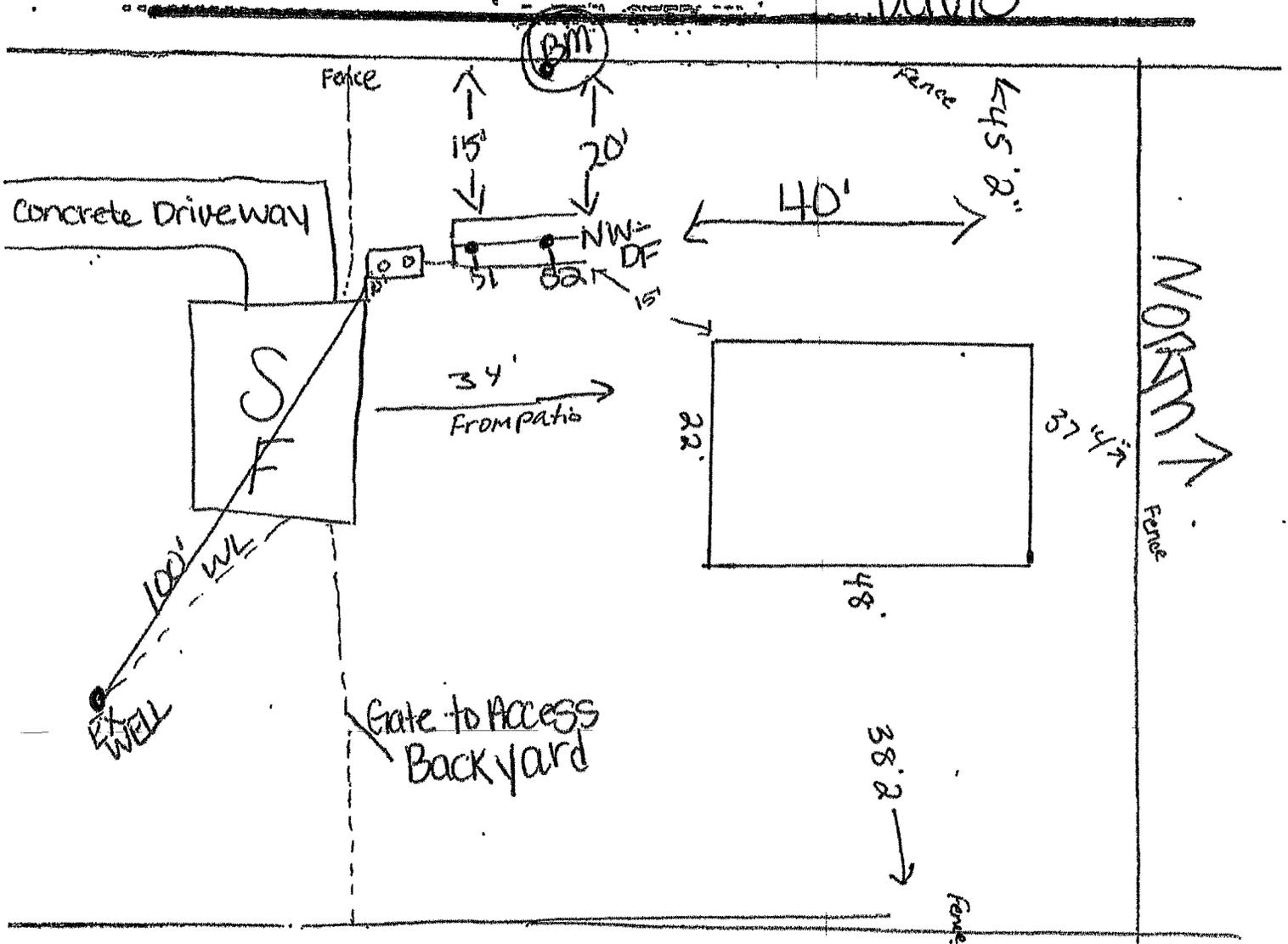
Incorporated 62-6.004, FAC

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STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 25-0861

DAVIS



Notes:

Plan submitted by: [Signature]
 Approved: [Signature] Not Approved: _____
 Date: 11/3/25
 Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT