



Suwannee River Water  
Management District  
9225 CR 49  
Live Oak, FL 32060  
TELEPHONE: 386.362.1001  
FAX: 386.362.1056  
www.mysuwanneeriver.com

## WATER USE PERMIT STATUS FORM

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Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Water Use Permit No.: \_\_\_\_\_

**Please check one of the boxes below, sign and date, and return to the District**

**General Water Use Permit by Rule:** I understand that I meet the criteria in 40B-2.041,

Florida Administrative Code, for a General Water Use Permit by Rule. I also understand that if I make modifications to my current water use, I will need to notify the Suwannee River Water Management District and may be required to apply for a Water Use Permit.

**Void:** I am requesting that the above Water Use Permit be voided since I am no longer

using the well(s) identified under this permit for the current permitted use. I also verify that the well(s) identified under this permit have been properly capped, abandoned, or are being used for residential use. I understand that if I change the use of the well(s), I will need to notify the Suwannee River Water Management District.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

**Status of Wells:** Size: \_\_\_\_\_

Active

Capped

Abandoned

Residential Use