



WATER USE PERMIT APPLICATION

Southwest Florida Water Management District

7601 Highway 301 North, Tampa FL 33637

(800) 836-0797 • Fax (813) 987-6746

ePermitting available at <http://www.swfwmd.state.fl.us/permits/>



SECTION I – CONTACT INFORMATION

If necessary, attach additional sheets if there are multiple applicants, owners, agents, etc.

1. **APPLICANT** (Complete legal name in which permit should be issued)

NAME: _____

If applicant is a business, provide a contact person: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____ Do you want all correspondence to be transmitted electronically to this address? Yes: _____ No: _____

Applicant is: Owner Lessee* Other (explain) _____

*Attach copy of current lease, or written authorization from property owner

2. **OWNER** (If different than applicant)

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____

3. **AGENT OR CONSULTANT** Address all correspondence to the person below? Yes No

NAME: _____

COMPANY NAME (if applicable): _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____

4. **COMPLIANCE CONTACT** (Person responsible for ensuring that the permit conditions are met)

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____

SECTION II – APPLICATION INFORMATION

Refer to the Applicant's Handbook for permit application guidance, located online at www.swfwmd.state.fl.us/permits/rules/.

1. **TYPE OF APPLICATION:** New Modification Renewal
 If this application is for a modification, please describe the modification request and the reason the modification is necessary. _____

2. **WATER USE PERMIT NO.** (if application is for renewal or modification): _____

3. **REQUESTED PERMIT DURATION:** 20 years _____ years (up to 20 years)
 I qualify for duration greater than 20 years, per Florida Statute _____ (list statute)

4. **PROJECT NAME:** _____ **COUNTY:** _____
PHYSICAL ADDRESS: _____

5. **RELATED PERMITS** (for projects other than Public Supply)
 - ENVIRONMENTAL RESOURCE PERMIT: MSSW/ERP No(s): _____
 - INDUSTRIAL WASTEWATER (IWW) PERMIT: IWW Permit No(s): _____
 - NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT (U.S. Environmental Protection Agency):
 NPDES Permit No(s): _____

SECTION III – USE CATEGORY

Please check all applicable water use categories associated with this permit application and complete the associated supplemental form(s) indicated. Refer to District rules for complete use category definitions.

Water Use Category	Supplemental Form
<input type="checkbox"/> Agricultural (e.g., crops, livestock, nursery, aquaculture, pasture)	Form A
<input type="checkbox"/> Commercial / Industrial (e.g., service business, food and beverage production, cooling and heating, commercial attraction, manufacturing, chemical processing, power generation)	Form B
<input type="checkbox"/> Landscape / Recreation (e.g., irrigation of parks, cemeteries, landscaped areas, golf courses, athletic fields, playgrounds)	Form C
<input type="checkbox"/> Mining / Dewatering (e.g., water use or removal associated with construction or excavation)	Form D
<input type="checkbox"/> Public Supply (e.g., public or privately owned water utility)	SWFWMD Form E
<input type="checkbox"/> Environmental / Other (e.g., aquifer remediation, environmental augmentation, cleaning and maintenance, or the use of water for other purposes not described in Rule 40D-2)	Form F
<input type="checkbox"/> Institutional (e.g., hospital, university, military base, correctional facility)	Form G
<input type="checkbox"/> Diversions and Impoundments (diversion or extraction of water)	Form H

SUMMARY OF SURFACE WATER (PUMP) FACILITIES

District ID No.	Permittee ID	Pump Capacity (gpm)	Pump Intake Diameter (inches)	Pump Type ¹	Name of Surface Water Body	Type of Surface Water Body ²	Status ³ (include date if proposed)	Type of Water Use Accounting Method ⁵	Last Meter Calibration ⁴	Requested Annual Average Quantity (gpd)	Requested Peak Month Quantity (gpd)	Requested Maximum Daily Quantity (gpd)	Type of Water Use (refer to Section II)

- 1 Centrifugal (impeller located above water level), submersible (pump set below water level), turbine (motor at ground surface that drives an impeller below water level), hydraulic dredge pump (typically used for mining), hydraulic dewatering pump (typically used for construction or mining), other (any pump that does not fall into one of the categories previously listed)
- 2 Ditch/canal, lake/pond (natural), lake/pond (artificial), river/creek, spring, mining/borrow pit
- 3 Active (currently in use), Inactive (does not have power, or the connection to the water supply system has been severed), Proposed
- 4 Flow Meter, Totalizer, Time Clock, Hour Meter
- 5 Enter the date of the last flow meter calibration or "no meter" if a totalizing flow meter is not installed

SUMMARY OF CONNECTION POINT FACILITIES

Connection points include locations where potable or non-potable water (including reclaimed water) purchased from a water supplier enters a project site.

District ID No.	Permittee ID	Water Supplier Name	Type of Water ²	Status ³ (include date if proposed)	Type of Water Use Accounting Method ⁴	Last Meter Calibration ⁵	Requested Annual Average Quantity (gpd)	Requested Peak Month Quantity (gpd)	Requested Maximum Daily Quantity (gpd)	Type of Water Use (refer to Section II)

1 Name of water supplier that provides water to the project through the connection point

- 2 Reclaimed water, potable water, surface water
- 3 Active (currently in use), Inactive (the connection to the water supply system has been severed), Proposed
- 4 Flow Meter, Totalizer, Time Clock, Hour Meter
- 5 Enter the date of the last flow meter calibration or "no meter" if a totalizing flow meter is not installed

SUMMARY OF SURFACE WATER (CULVERT) FACILITIES (SFWMD)

If this project utilizes culvert facilities that provide gravity-fed surface water from an off-site source, please attach a completed Culvert Facilities Table.

SECTION V – USE OF LOWEST QUALITY WATER AND EVALUATION OF RECLAIMED WATER FEASIBILITY

The applicant may be required to evaluate the feasibility of utilizing reclaimed water. The feasibility analysis must be completed as outlined in the Applicant's Handbook.

SECTION VI – SUMMARY OF REQUESTED WATER USE

Summarize the requested water use from each supplemental form (Agricultural, Public Supply, Commercial / Industrial, etc.) in the table below.

Year	Requested Amounts and Source(s) of Water				
	Source 1 Name ¹ (gpd)	Source 2 Name (gpd)	Source 3 Name (gpd)	Source 4 Name (gpd)	Total Requested Water Use (gpd)
Year 20____					

¹ Provide the name of the water source. Examples include the Upper Floridan aquifer and the Biscayne aquifer.

SECTION VII – AQUIFER STORAGE AND RECOVERY *(complete if applicable)*

ASR Facility Name	Source of Stored Water ¹	Storage Aquifer Name	Recovery Water Destination	Projected Demand Average (gpd)	Projected Demand Maximum (gpd)

¹ Aquifer Name, surface water body, water treatment plant name.

Please describe any projected increases or decreases (from historical average) in the amounts stored or recovered.

SECTION VIII – IMPACT EVALUATION

The requested water use must not cause interference with existing legal uses, harm to natural resources or harm to existing off-site land uses. In order to demonstrate harm will not occur as a result of the requested water use, studies and/or impact evaluations may be required. Please refer to Applicant's Handbook for guidance regarding the impact evaluations and attach your analysis, if applicable.

SECTION IX – APPLICANT CERTIFICATION

I certify that to the best of my knowledge and belief, all of the information provided on this form and in any attachment to it are true and accurate. I also certify that I have legal authority to execute this application for the applicant and certify that the applicant will have sufficient legal authority to undertake the activities described herein. I understand that for any material false statement in an application to continue, initiate, or modify a use, or for any material false statement in any report or statement of fact required of the permittee, may result in revocation, in whole or in part, of the permit. With advance notice, I agree to provide District staff with proper identification entry to the project site for the purpose of performing analyses of the site for determining whether the conditions for issuance will be met.

(If applicable) I authorize _____ to act as my agent for permit application coordination.

OWNER/APPLICANT'S NAME OWNER/APPLICANT'S SIGNATURE DATE
(print or type)

AUTHORIZED AGENT'S NAME AUTHORIZED AGENT'S SIGNATURE DATE
(print or type)

(Additional signatures may be required by some Districts, for example, owner signature may be required by some Districts when the applicant is a lessee.)

SECTION X – APPLICANT CHECKLIST

The following items must be included with the permit application submittal:

- Proof of Property Control (Deed, Lease)
- Application Fee (Refer to online fee schedule or Applicant's Handbook)
- Location/Site Map
- Supplemental Form(s) and associated supporting information (i.e. maps, calculations)
- Water Conservation Plan (if applicable)