

**Southwest Florida Water Management District**  
**2379 Broad Street (US 41 South) Brooksville, FL 34604-6899**  
**(352) 796-7211 or 1-800-423-1476 (Florida Only) SUNCOM 628-4150**

**APPLICATION FOR RENEWAL OF A WATER WELL CONTRACTOR'S LICENSE**

Please complete the following information and sign this form. Send the form along with the applicable license fee to the attention of the Senior Regulation Processing Specialist, Brooksville Regulation Department.

**FEE SCHEDULE:**      If postmarked on or before July 31 - \$50.00  
                              If postmarked after July 31 - \$125.00    If license is inactive for more than 1  
                              year after July 31 of each odd-numbered year, application for a new license will  
                              be required.

Water Well Contractor's License Number: \_\_\_\_\_

Biennial License Renewal Period: 20\_\_ to 20\_\_

Name of Contractor: \_\_\_\_\_

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

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Cellular Phone No.: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone No.: \_\_\_\_\_

I hereby certify that the above information is correct and request the renewal of my Water Well Contractor License. I understand and acknowledge my responsibilities under applicable rules and statutes relating to the licensing, permitting and construction of water wells including the Department of Environmental Protection's Rules (Ch. 62-531, F.A.C.), Disciplinary Guidelines and Procedures Manual and Florida Unified Citation Dictionary. I further certify that I have completed a minimum of 12 hours of approved coursework hours, a minimum of 6 of which are related to water well construction practices and applicable water well construction rules.

Number of Decals Needed: \_\_\_\_\_

Fee Amount Enclosed: \$ \_\_\_\_\_

\_\_\_\_\_  
Signature