

APPLICATION FOR RENEWAL OF A WATER WELL CONTRACTOR'S LICENSE

**Southwest Florida Water Management District
7601 US Highway 301 North, Tampa, Florida 33637-6759
(813) 985-7481 or 1-800-836-0797 (Florida Only)**

Please complete the following information and sign this form. Send the form along with the applicable license fee to the attention of the Well Construction Section, Water Use Permit Bureau at 7601 U.S. Highway 301 North, Tampa, FL 33637-6759.

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.), and the Water Well Construction Disciplinary Guidelines and Citations Dictionary (6-22-14). I further certify that I have completed a minimum of 12 hours of approved coursework hours for Continuing Education Credits (CECs) earned within the two-year period directly preceding this biennial renewal cycle; a minimum of 6 of which are related to water well construction practices and applicable water well construction rules. Copies of certificates of completion of CECs are enclosed. (Confirmation of approved coursework completion will be accepted from DEP or the DEP Administrator, if available, in lieu of certificates of completion.)

Number of Decals Needed: _____

Fee Amount Enclosed: \$_____

Signature