

NOTICE OF INTENT TO USE THE GENERIC PERMIT FOR DISCHARGES FROM FRESH CITRUS FRUIT PACKINGHOUSES TO PERCOLATION PONDS

(subsection 62-621.500(1)(b), F.A.C.)

INSTRUCTIONS

This Notice of Intent (NOI) form shall be completed and submitted to the Department of Environmental Protection (DEP) as part of the request for coverage under the Generic Permit for Fresh Citrus Packinghouses to Percolation Ponds paragraph 62-621.500(1)(a), F.A.C. The type of facility that qualifies for use of the generic permit and additional requirements to request coverage is specified in Rule 62-621.500(1)(a), F.A.C. Applicants should be familiar with the rule, generic permit document and instructions before completing this NOI form. **Attach additional information on separate sheets as necessary.**

- 1. Submit two copies of this completed form and supporting documentation and the application fee to the appropriate DEP District office. Checks should be payable to the Florida Department of Environmental Protection. **DEP will not process this form without the appropriate generic permit fee.**
- 2. Facilities converting from existing individual wastewater permits or from coverage under the previous (May 10, 2005) generic permit that do not propose to increase wash water discharge flow shall complete only Parts I, II, III and VI.
- 3. Type or print all information in ink. Where attached sheets (or other technical documentation) are used in place of the blank spaces provided, indicate appropriate cross-references on the form. If an item is not applicable to your project, indicate "NA" in the appropriate space provided.

PART I PERMIT APPLICATION TYPE

Instructions: All facilities complete Part I.

Processing Fee (Section 403.087(6)(a)12., F.S.)

Permit Application Type (mark one only)	Application Fee	
New or expanded facilities	\$500	
Initial conversion from an existing industrial wastewater permit or renewal of coverage under this generic permit	\$100	

PART II GENERAL INFORMATION

<u>Instructions</u>: All facilities complete Part II.

A. PERMITEE INFORMATION

1. DEP Permit No.:							
2. Permittee Name:							
3. Facility Name:							
4. Contact Person:		5. Title					
6. Phone No.: () -		7. Fax No.: () -					
8. Email Address:							
9. Street or P.O. Box:							
10. City or Town:	11.	State:	12.	Zip:			
B. FACILITY LOCATION:							
1. Street, Route or Other Specific Identifier:							
2. County:							
3. City or Town:	4. 9	State:	5. Zi	p Code	e:		
6. Latitude: ° ′ ″	7.	Longitude:		0	,	"	
C. OPERATOR INFORMATION: The operator of the facility is the legal entity which legal name of the person, business or other entity information requested below:			-	-			
1. Is the name in II.A.4. the owner? ☐ Yes ☐ No (If no, complete this section)	2.	Name:					
3. Phone No.:							
4. Email Address:							
5. Street or P. O. Box:							
6. City or Town:	7.5	State:		8. Zip	Cod	le:	

PART III SITE INFORMATION

<u>Instructions</u>: All facilities complete Part III.

A. VICINITY MAP:

Attach a topographic map showing the general location of the facility, including percolation pond(s) showing known public and private potable water supply wells, sink holes, springs, rivers and other surface water bodies within ¼-mile of the percolation pond(s).

B. SITE PLAN (may be combined with vicinity map):

Attach a scaled site plan(s) showing the following:

- a. Property boundaries;
- b. Existing and proposed wash water treatment system and percolation pond(s); and
- c. Existing and proposed onsite runoff and drainage patterns.
- d. Locations and designations of monitoring wells proposed for use under the permit (MWB, MWC, etc.)

PART IV - SOLIDS MANAGEMENT

<u>Instructions</u>: New facilities and facilities that are increasing wash water discharge flow ("Expanding") must complete all of Part IV.

Pretreatment of the wash water consists of (check all that apply):				
	Screening Sedimentation Other, Describe below:			
-				
Sol	ds disposal is to a:			
<u> </u>				
Instri	TV FACILITY TREATMENT AND DISPOSAL SYSTEM DESIGN DRMATION ctions: New facilities and facilities that are increasing wash water discharge flow ("Expanding") complete all of Part V.			
INF(Instri must	ORMATION ctions: New facilities and facilities that are increasing wash water discharge flow ("Expanding")			
INF(Instri must	ORMATION ctions: New facilities and facilities that are increasing wash water discharge flow ("Expanding") complete all of Part V. ACILITY OPERATION			
INF(Instri must A. F	Ctions: New facilities and facilities that are increasing wash water discharge flow ("Expanding") complete all of Part V. ACILITY OPERATION Months during which the facility is operated:			

B. PERCOLATION POND DESIGN:

For each percolation pond submit	the f	ollowing:
Number of cells per pond :	Wet	ted area:
Freeboard Provided: fee (Must be at least 1 foot)	et	Side slope ratio:
Design Loading Rate: in	ches	/week

1. Seasonal high water table elevation (highest average depth during the wettest season):

3. Provide engineering report documenting that the percolation pond(s) will provide infiltration for the design loading rate and will and contain the 25-year, 24-hour rainfall event. A ground water mounding evaluation will be considered an appropriate type of analysis for determining infiltrative capacity.

C. GROUND WATER BACKGROUND AND MONITORING WELLS

- Pursuant to Rule 62-520.420(2) and (3), F.A.C., attach ground water monitoring data for background or natural background conditions indicating maximum value of total recoverable sodium for the previous five years from discharge monitoring reports (DMRs) for facilities currently under permit coverage, or other available background data for new facilities. All data must meet the requirements of Chapter 62-160, F.A.C., Quality Assurance.
- 2. Pursuant to Rule 62-520.600(3), F.A.C., Attach information on:
 - a. Monitoring well, depth, construction materials, length of well screen, location and designation (MWB, MWC, etc.), whether monitoring wells are existing or proposed to be constructed;
 - b. Rate and direction of ground water flow based on relative ground water elevation data from three onsite piezometers; This information shall be used to determine the locations of proposed monitoring well locations; and
 - c. Soil types from one onsite soil boring to the first confining layer. Information from piezometer or monitor well installation may be used.
- 3. Facilities with more than one percolation pond may select a single representative percolation pond for ground water monitoring considering factors such as similarity of hydrogeological and soil characteristics and loading rates.

PART VI. CERTIFICATIONS

A. OWNER OR OPERATOR¹

Instructions: All facilities complete Part III.

- 1. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision and is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. I agree to maintain and operate the site as described above and to notify the Department promptly if there are any significant deviations from the design or plans submitted with this notice.

¹ Signatory requirements are contained in Rule 62-620.305, F.A.C.

B. PROFESSIONAL ENGINEER LICENSED IN FLORIDA

Instructions:

- Certification by a Professional Engineer is not required for the initial conversion of existing facilities from individual wastewater permits or from coverage under the previous (May 10, 2005) generic permit provided that the facility meets the requirements of Rule 62-621.500(1)(d)3., F.A.C.
- Certification by a Professional Engineer is required, however, for subsequent renewal of coverage under this generic permit.

This is to certify that the engineering feature	s of this project have been either:
in the permit application. There is reasonal	eatment and disposal of pollutants characterized ble assurance, in my professional judgment, that ined and operated, will discharge an effluent
Company Name (type or print)	Name (type or print)
Address	
E-mail	Florida License No.
Telephone	(Affix Seal)
	Signature & Date