

# SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET  
BROOKSVILLE, FLORIDA 34604-6899  
(352) 796-7211 or 1-800-423-1476 (FL only)  
TDD only: 1-800-231-6103 (FL only)

## INDIVIDUAL WATER USE PERMIT APPLICATION

THE INDIVIDUAL WATER USE PERMIT APPLICATION IS TO BE COMPLETED BY ALL APPLICANTS FOR WITHDRAWALS OF GROUND WATER OR SURFACE WATER INCLUDING ALTERNATIVE WATER SUPPLIES THAT ARE REQUIRED TO MEET A COMBINED ANNUAL AVERAGE DAILY WATER DEMAND THAT EQUALS OR EXCEEDS 500,000 GPD.

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OR PAGE COPIES REFERRING TO THE PAGE NUMBER AND FORM ENTRY. PROVIDE DOCUMENTATION AND REFERENCES WHERE APPROPRIATE. COMPLETE ALL APPROPRIATE SUPPLEMENTAL FORMS PER INSTRUCTIONS IN PART V. THIS INFORMATION IS REQUESTED PURSUANT TO CHAPTER 373, FLORIDA STATUTES, AND RULES 40D-2.091, 40D-2.101 AND 40D-2.301, FLORIDA ADMINISTRATIVE CODE.

### PART I. ADMINSTRATIVE

**APPLICATION TYPE** (check one):  New  
 Renewal (Permit number: \_\_\_\_\_)  
 Modification (Permit number: \_\_\_\_\_)  
 Expired (Previous permit number: \_\_\_\_\_)

**PERMIT TERM:** If this is an application for a new permit or for renewal of an existing permit, please check the permit term requested. (Application for modification typically defers to existing permit term.)

6 years  \_\_\_\_ years

If a permit term greater than 6 years is requested, attach an explanation for the need.  Attached

**Project name:** \_\_\_\_\_

**APPLICANT:** All owners of the property to be included on this permit must be listed as applicants. The permit will be issued in the names of all persons or entities listed on the deed for the property. If there are multiple landowners, provide each applicant's information on blank copies of this page. Lessees on the property, who are included as an applicant, must also be listed and identified as a lessee.

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Attachment for more applicants

**CONSULTANT:** This is the person who may be employed by the applicant to complete this application on the applicant's behalf. If there is a consultant the District should contact regarding this application, provide the contact information below. A copy of all correspondence with the applicant will be copied to the consultant until such time as the permit is issued. An applicant can have both a consultant and a contact, and they can be the same or different persons.

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Company: \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_

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

City, State, ZIP: \_\_\_\_\_

E-mail address: \_\_\_\_\_  There is no consultant

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**CONTACT:** This is a person who may be employed by the applicant to handle all correspondence including compliance correspondence on the applicant's behalf after the permit is issued. Contacts may be farm/grove managers, golf course superintendents, etc. All correspondence with the contact will be copied to the permittees.

Name: \_\_\_\_\_ Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

Company: \_\_\_\_\_ Cell phone: ( \_\_\_\_\_ ) \_\_\_\_\_

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

City, State, ZIP: \_\_\_\_\_

E-mail address: \_\_\_\_\_

There is no contact other than the applicant

**PART II. PROPERTY**

**OWNERSHIP OR LEGAL CONTROL**

- The property to be included in this application is owned by the applicants.
- Applicant has other legal control (an application made by a lessee on leased property must be a joint application in the name of the lessee and the owners, or be only in the name of the owners).

**NEW AND RENEWAL APPLICATIONS:** Provide documentation of ownership or other legal control (control that is other than direct ownership).

- Attached

**LEASED PROPERTY:** If lessee is a co-applicant, provide a copy of either (check document type and attach):

- Lease
- Letter signed by owner describing lease arrangement and duration
- Not applicable

***NOTE:** Permits will not be issued for duration longer than the lease when a lessee is a co-applicant, unless the lease is renewable. If renewable, the applicants may be required to provide a copy of the renewed lease at the appropriate time. All owners and the lessee must sign this application.*

**ACREAGE:** Owned/Controlled: \_\_\_\_\_ Leased:\* \_\_\_\_\_ Serviced:\*\* \_\_\_\_\_

\* *Leased – Land leased by the applicant on which there is to be water used by the permittee.*

\*\* *Serviced – Land owned by another party, not leased by this applicant, and not included in any water use permit for which this applicant proposes to provide water for the other party's use. Provide a copy of the service agreement.*

- Attached

**PART III. MAP**

**LOCATION MAP**

***Note to public supply applicants:** Also see the service area map requirements in the supplemental form for Public Supply.*

**Provide a recent aerial map showing:**

- North arrow
- Scale designation; all maps should have a minimum scale of 1" = 2,000'
- Landmarks such as roads and political boundaries
- Applicant property boundary
- Ponds, lakes, streams, canals, rivers or any surface water body that is to be used as a water source. If a surface water source is to be constructed, outline its proposed footprint on the map.
- Recirculation or settling ponds, discharge points labeled for reference
- Interconnected withdrawal points such as augmentation repump systems

**INDIVIDUAL WATER USE PERMIT APPLICATION**

- All on-site wetlands
- Withdrawal point locations, including standby, rotational, or repump withdrawals. Show locations of all capped and plugged wells. Label each withdrawal point with the District ID number or Owner ID number.
- Locations of above ground or in-ground storage facilities, if any, for the offsite water sources
- Location of monitor wells and surface monitors (staff gauges, weirs, etc.) that are associated with this application, if any, labeled with the District ID number or Owner ID number
- Land parcels serviced or leased for which water from this project will be provided
- If this application includes noncontiguous owned or leased parcels, or if the parcels to be serviced are a distance from the withdrawal point locations, provide separate large-scale maps (enlarged areas) of each parcel in addition to a smaller-scale map (broader area) that includes all parcels.

**PART IV. RELATED PERMITS**

**SURFACE WATER MANAGEMENT**

Does the applicant have or has the applicant applied for any related Environmental Resource Permit (ERP), Management and Storage of Surface Water (MSSW) permit, or an Agricultural Ground and Surface Water Management (AGSWM) exemption for this project?

Yes     No

If “yes,” check which applies and provide the permit number:

ERP/MSSW number: \_\_\_\_\_

AGSWM exemption number: \_\_\_\_\_

If “no,” or if the existing ERP/MSSW or AGSWM does not include your proposed activity, do you intend to:

1. Change the existing surface water drainage on or from the property?  
 Yes     No
2. Add to the pollutant load from the property?  
 Yes     No
3. Put non-farmed or long-fallow land into crop?  
 Yes     No
4. Make a change in crop type and/or irrigation method?  
 Yes     No
5. Change the major water use type? (e.g., from agriculture to recreation/aesthetic)  
 Yes     No

*If you answered “no” to questions 1 through 5 on the previous page, it is likely you will not have to demonstrate that an ERP or AGSWM exemption is needed; however, be advised that District staff’s evaluation of this application in detail may indicate otherwise.*

*If you answered “yes” to any questions 1 through 5, you may need an ERP or an AGSWM exemption. For assistance, contact the Environmental Resource Permitting section at the District service office that administers water use permits in your area. Application for an ERP must be completed before a water use permit will be issued. If your agricultural operation qualifies for an AGSWM exemption, the evaluation must be done before a water use permit will be issued.*

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**INTEGRATED SURFACE WATER MANAGEMENT AND WATER USE SYSTEMS**

Is there an existing or proposed surface water management system that is integrated with the water use for this project (e.g., augmentation repump systems; withdrawals from detention/retention stormwater ponds, etc.)?

- Yes
- No (Skip to "WATER DISPOSAL".)

If "yes," on a separate attachment, describe how the system is managed in terms of regulating water levels and flows within the system. Include all withdrawal points and proposed quantities from ponds used for water quality treatment of stormwater runoff and ponds used for stormwater capture for flood prevention that are also used as water sources. Describe how the withdrawal of water from such systems for water use will not interfere with their surface water management design. Include information such as invert elevations, pond water levels, culverts connecting ponds, weirs, control structures, storage capacity (in gallons), etc. Also show locations of each on the requested map.

- Attached

**WATER DISPOSAL**

If water is disposed from this site, provide the information below. If water is not disposed from this site, skip to the next section.

- Yes – Water is disposed from this site
- No (Skip to PART V.)

Annual average quantity of water that is disposed offsite (include irrigation runoff): \_\_\_\_\_ gpd

Indicate the disposal method and the percentage of the total that is disposed by each method.

<i>Disposal Method</i>	<i>% of Total Disposed</i>
Spray irrigation field	_____
Percolation via retention pond	_____
Offsite discharge	_____
Other (describe below)	_____
<b>Total:</b>	<b>100%</b>

Other (description): \_\_\_\_\_

**WATER DISCHARGED OFF-SITE** – If water is discharged off-site, provide the following:

**National Pollutant Discharge Elimination System (NPDES) number(s):** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**Florida Department of Environmental Protection discharge permit number(s):** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Submit an evaluation of potential opportunities for recycling/reusing this water that describes how much could be reused, where it can be reused, and how it can be reused.

- Attached

**PART V. SUPPLEMENTAL FORMS REQUIRED**

**SOUTHERN WATER USE CAUTION AREA (SWUCA)** – If at least one withdrawal point is located in the SWUCA, the entire permit is considered to be in the SWUCA. All applicants in the SWUCA are required to include the SWUCA Supplemental Form (Form No. LEG-R.007.02 (04/09) with this application. Within the SWUCA Supplemental Form, there are directions to include other supplemental forms depending upon the applicant's plans.

- Attached

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**DOVER/PLANT CITY WUCA** - If at least one withdrawal point is located in the Dover/Plant City WUCA, the entire permit is considered to be in the Dover/Plant City WUCA. All applicants, other than those for renewal with no changes to their water use permit or applicants for partial or full transfer of a WUP, in the Dover/Plant City Water Use Caution Area are required to include the Dover/Plant City WUCA Supplemental Form (Form No. LEG-R050.00 (12/10)) with this application. Within the Dover/Plant City WUCA Supplemental Form, there are directions to include other supplemental forms depending upon the applicant's plans.

Attached

If there is at least one withdrawal point in the SWUCA and Dover/Plant City WUCA, the application is subject to the requirements of both areas and must submit both Supplemental Forms.

**USE TYPES** – Check all use types that apply. Supplemental forms must be completed for all use types indicated. See the *Water Use Permit Information Manual, Part B, Basis of Review*, Chapter 3 for explanations of the use classifications.

Public Supply       Recreation or Aesthetic       Agriculture       Industrial or Commercial

**PART VI. WATER QUANTITIES AND SOURCES**

**TOTAL DEMAND QUANTITIES** – Indicate the total quantity of water necessary to meet the applicant's water demand for the uses listed in the use type supplemental forms for the remainder of the permit term (for modifications), or the next six years; or the requested permit term if greater than six years (for new and renewals).

See the *Water Use Permit Information Manual, Part B, Basis of Review*, Chapter 3 for further explanation of these quantities.

**Annual average daily** quantity (total amount of water requested for a calendar year, divided by 365 days, in gallons per day): \_\_\_\_\_ gpd

**Peak month daily** quantity (amount of water requested during the highest water-use month in a calendar year, divided by the number of days in that month, in gallons per day): \_\_\_\_\_ gpd

**Maximum daily** quantity (maximum amount needed for any single day in gallons; appropriate if application is for crops requiring frost/freeze protection or a well field where the operation requires maximum use of any withdrawal point at any time): \_\_\_\_\_ gpd

**IMPORTED WATER SOURCES** – In the following table, provide information about *all* sources for water that are imported or are intended to be imported from an external entity to meet water needs for this project. If the supplier has a water use permit (WUP), provide the WUP number. Indicate the person with whom you have contact for this service.

**Source type descriptions:**

*Alternative water supply (AWS)*– Water from a nontraditional source that can be used at this site without further treatment, such as reclaimed water or captured stormwater from another operation that is provided to this site.

*Public water supply* – Potable or non-potable water from a public supply utility.

*Other water supply* – Water from sources other than alternative water supply or from a public water supply utility. Examples are water discharged from a mining/dewatering or industrial/commercial site.

Not applicable (Skip to "HISTORIC USE OF IMPORTED WATER/RECLAIMED WATER/OTHER AWS.")

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**IMPORTED WATER SOURCES TABLE**

Source Type	WUP No.	Water Type Supplied	Annual Avg. (gpd)	Peak Month (gpd)
<input type="checkbox"/> Alternative water supply <input type="checkbox"/> Public water supply <input type="checkbox"/> Other water supply		<input type="checkbox"/> Discharged water <input type="checkbox"/> Reclaimed water <input type="checkbox"/> Ground water <input type="checkbox"/> Stormwater <input type="checkbox"/> Potable water		
<input type="checkbox"/> Alternative water supply <input type="checkbox"/> Public water supply <input type="checkbox"/> Other water supply		<input type="checkbox"/> Discharged water <input type="checkbox"/> Reclaimed water <input type="checkbox"/> Ground water <input type="checkbox"/> Stormwater <input type="checkbox"/> Potable water		
<input type="checkbox"/> Alternative water supply <input type="checkbox"/> Public water supply <input type="checkbox"/> Other water supply		<input type="checkbox"/> Discharged water <input type="checkbox"/> Reclaimed water <input type="checkbox"/> Ground water <input type="checkbox"/> Stormwater <input type="checkbox"/> Potable water		

**Supplier information** – Provide information for any supplier of water to your project, including public water supply, reclaimed water, discharged water, captured stormwater derived from another entity. Provide a copy of the contract or agreement with the supplier that shows quantities, duration of agreement, and cost per 1,000 gallons.

Name: \_\_\_\_\_ Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

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

City, State, ZIP: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Contract/agreement attached

If there are additional water suppliers, provide the same information on a separate sheet and submit a copy of each contract or agreement that shows quantities, duration of agreement, and cost per 1,000 gallons.

Attached       There are no additional water suppliers

**HISTORIC USE OF IMPORTED WATER/RECLAIMED WATER/OTHER AWS**

If you received reclaimed water, other alternative water supply, used self-generated alternative water supply, or received water from a public supply utility (excluding potable/sanitary use) during the previous permit term or for the previous six years (whichever is greater), indicate below and attach a yearly summary of quantities delivered and used. If metered use is not available, submit documentation of how much was received (such as copies of receipts for purchases of reclaimed water). If receipts are not available because of a no-charge agreement, submit estimates from the supplier of historical yearly delivery. If there was historic use of self-generated alternative water supply for this same period and this information was quantified but not submitted to the District, also include the quantified amounts in an attachment.

Attached       Not applicable (Skip to PART VII.)

*If you have provided this information to the District in the past as required data submittals, contact the service office that administers your permit to request an output file for review. (Note, an output file is not available if submittal of this information was in report form rather than data that was input into the District’s database.) This is recommended to verify data entries. If you review the data on file and agree to its use as is, indicate below. If you review the data on file and want to propose changes, indicate below and attach the revised data.*

I have reviewed the data on file at the District and agree to its use as is.

I have reviewed the data on file at the District and propose changes. (Attach digital file in comma-delimited format)

**PART VII. WITHDRAWAL POINT INFORMATION**

**Groundwater Well Withdrawal Points**

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include

**INDIVIDUAL WATER USE PERMIT APPLICATION**

surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are “below land surface”.

**GROUNDWATER WELL WITHDRAWAL POINT TABLE**

<i>Make copies of this table if there are more wells to be included on this permit.</i>	<b>Owner ID No.</b>	<b>Owner ID No.</b>
<b>District ID No.</b> – Number assigned by District if withdrawal point is included on existing revision of this WUP		
<b>Status: Indicate</b> <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)		
<b>Function</b> – Reason for withdrawal.		
<b>Standby (Full)</b> – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Standby (Partial)</b> – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Rotation Well</b> – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Well Completion Report No.</b> – As filed by driller to District.	# _____ <input type="checkbox"/> Unknown	# _____ <input type="checkbox"/> Unknown
<b>Construction Date</b> – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / ____ mm dd yy	____ / ____ / ____ mm dd yy
<b>Casing Diameter</b> – Outside diameter at land surface.	_____ inches	_____ inches
<b>Total Depth</b> – Depth below land surface.	_____ ft. <input type="checkbox"/> Unknown	_____ ft. <input type="checkbox"/> Unknown
<b>Casing Depth</b> – Depth to which continuous casing is set from surface.	_____ ft. <input type="checkbox"/> Unknown	_____ ft. <input type="checkbox"/> Unknown
<b>Liner Depth</b> – Depth from and depth to (feet )	From _____ ft. To: _____ ft <input type="checkbox"/> Unknown	From _____ ft. To: _____ ft <input type="checkbox"/> Unknown
<b>Pump Capacity</b> – Gallons per minute (gpm) pump can produce.	_____ gpm	_____ gpm
<b>Pump Bowl Depth</b> – Depth to which the pump bowl/ intake is set.	_____ feet	_____ feet
<b>Mainline Diameter</b> – Outside diameter of the main discharge pipe from well or pump.	_____ inches	_____ inches
<b>Metered</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Meter Type</b> – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: _____	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: _____
<b>Meter Serial Number</b> – If unknown, assign a number and put into parentheses.		
<b>Annual Average</b> – Quantity to be routinely withdrawn in one year, divided by 365..	_____ gpd	_____ gpd
<b>Peak Month</b> – Quantity to be withdrawn during the month of highest use, divided by the number of days in that month.	_____ gpd	_____ gpd
<b>Maximum Daily</b> – Maximum quantity to be withdrawn in any single day.	_____ gpd	_____ gpd

**INDIVIDUAL WATER USE PERMIT APPLICATION**

Describe the future use of all capped wells. If there are multiple capped wells, or wells to be capped, reference the Owner ID numbers: \_\_\_\_\_

List any wells (District ID number or Owner ID number) for which a caliper, video, or other geophysical log has been created, but has not been previously submitted to the District: \_\_\_\_\_

Submit a copy of the log and check the type that applies:  Video  Caliper  Other  None

Log copy attached Describe Other: \_\_\_\_\_

**Surface Water Withdrawal Points** - If there are or will be any surface water withdrawal points and the cumulative outer diameters of the intake pipes is four (4) inches or more, include them on this application. Include existing, inactive (pump and pipe assembly still exist but are not used) and proposed surface water withdrawal points. Do not include surface water pumps for which the sole purpose is to route water from one on-site surface water body to another, or to withdraw alternative water supplies.

**SURFACE WATER WITHDRAWAL POINT TABLE**

<i>Make copies and complete if there are more than two surface water withdrawal points.</i>	<b>Owner ID No.</b>	<b>Owner ID No.</b>
<b>District ID Number</b> (if any)		
<b>Water Body Name</b> – Name of water body. If unnamed, name it anything other than None, No-Name or Not Specified.		
<b>Source Type:</b> <input type="checkbox"/> Natural (N) <input type="checkbox"/> Created-unlined (CU) <input type="checkbox"/> Created-lined (CL)		
<b>Water Body Type:</b> <input type="checkbox"/> Borrow Pit (BP) <input type="checkbox"/> Pond (P) <input type="checkbox"/> Lake (LK) <input type="checkbox"/> Reservoir (RV) <input type="checkbox"/> Canal (C) <input type="checkbox"/> Mine Pit (MP) <input type="checkbox"/> Retention Pond (RP) <input type="checkbox"/> River/Stream (RS)		
<b>Acreage</b> – Put “N/A” if flowing water body		
<b>Status - Indicate</b> <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Dismantled (DS) <input type="checkbox"/> Existing (EX)		
<b>Function</b> – Reason for withdrawal. See pre-application checklist.		
<b>Intake Diameter</b> – Outside diameter of pipe extending into water.	_____ inches	_____ inches
<b>Construction Date</b> – Mo./yr. If proposed, put anticipated completion date.	____/____ mm yy	____/____ mm yy
<b>Pump Capacity</b> – Gallons per minute (gpm) pump can produce.	_____ gpm	_____ gpm
<b>Rotation</b> (withdrawal point used on rotational basis with another withdrawal point)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Standby Full</b> – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Standby (Partial)</b> – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Annual Average</b> – Quantity to be withdrawn in one year, divided by 365.	_____ gpd	_____ gpd
<b>Peak Month</b> – Quantity to be withdrawn in a single month, divided by the number of days in that month.	_____ gpd	_____ gpd
<b>Maximum Daily</b> – Maximum quantity to be withdrawn in any single day.	_____ gpd	_____ gpd
<b>Metered</b> –	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**SURFACE WATER WITHDRAWAL POINT TABLE (continued)**

<b>Meter Type</b> – <input type="checkbox"/> Totalizing Flow (TF) <input type="checkbox"/> Digital (D) <input type="checkbox"/> Hourly (H) Units: _____ (If other than gallons.)		
<b>Meter Serial Number</b> – If unknown, assign a number and put into parentheses.		
<b>Mainline Diameter</b> – Outside diameter of the main discharge pipe from pump.	_____ inches	_____ inches

**Connected Or Related Withdrawal Points**

Provide owner ID numbers for withdrawal points used in conjunction with another, such as in an augmentation-repump operation. For a standby or partial standby withdrawal point, indicate the withdrawal point supported.

**CONNECTED WITHDRAWAL POINTS TABLE**

Augmentation Source Owner ID No.	Associated Repump Owner ID No.	Withdrawal Point on Full Standby Owner ID No.	Withdrawal Point Supported Owner ID No.	Withdrawal Point on Partial Standby Owner ID No.	Withdrawal Point Supported Owner ID No.

List withdrawal points that are interconnected because they individually feed into a single irrigation system or water conveyance system: \_\_\_\_\_

None

List withdrawal points that are connected prior to connection into a single irrigation system or other water conveyance system (ganged). \_\_\_\_\_

None

**PART VIII. ALTERNATIVE WATER SUPPLY SOURCES**

“Alternative water supply” describes water that has been reclaimed after one or more public supply, municipal, industrial, commercial or agricultural uses; the downstream augmentation of water bodies with reclaimed water; storm water; or any other water supply source that is designated as non-traditional for a water supply planning region in the applicable regional water supply plan. Other alternative water supplies are: saltwater; brackish surface water or brackish ground water; surface water captured predominately during wet-weather flows; sources made available through the addition of new storage capacity for surface or ground water. Inclusion of reclaimed water and seawater in this definition does not alter the exemption from water use permitting for these sources (see the Water Use Permit Information Manual, Part B, Basis of Review, Section 1.2).

Not applicable. Use of an alternative water supply is not anticipated during the term of this permit.

*If you checked “not applicable,” attach a report on your investigation of the feasibility of using alternative water supply to reduce withdrawals from the resource. If the report states that use of an alternative water supply was found to be infeasible, the reason must be fully documented. Infeasibility can include unavailability or that it is cost prohibitive.*

Report attached

If you received AWS or will receive AWS during the upcoming or remaining permit term, please provide the information below for the reclaimed water provider. If the provider has a water use permit (WUP), provide the

**INDIVIDUAL WATER USE PERMIT APPLICATION**

WUP number. Submit a copy of the contract or agreement between you and the supplier that shows contract amounts and cost per 1,000 gallons.

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

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

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

Telephone ( ) \_\_\_\_\_ Email: \_\_\_\_\_ WUP No. \_\_\_\_\_ (if the supplier has one)

Contract Attached

Attach the same information for additional suppliers.  Attached

**Inflow Facilities And Repump Withdrawal Points**

Complete the table below with information on the type of alternative water supply and facilities used. In the space below "Owner ID No." show the appropriate attribute.

*The inflow line of an off-site derived alternative water supply is to be listed as a withdrawal point on the permit because it is a source of water. If the alternative water supply is stored because it is to be repumped to the end use, the surface water withdrawal pump is also an alternative water supply withdrawal point and is indicated as a repump source in the table below. The withdrawal point for an on-site created alternative water supply is where the supply leaves its site of origination or storage for its end use, and is neither inflow nor repump but will be indicated as self-supplied in the table below.*

**Note:** *If an off-site alternative water supply is delivered to a storage facility prior to use, there will be two alternative water supply withdrawal points: the in-flow line and the repump line.*

Indicate all existing and proposed alternative water supply in-flow and repump withdrawal points. Include alternative water supply type (see definition) even if a water use permit is not required for its use.

**ALTERNATIVE WATER SUPPLY WITHDRAWAL POINT TABLE**

<i>Make a copy of this table if there are more than two AWS supply withdrawal points</i>		<b>Owner ID No.</b>	<b>Owner ID No.</b>
<b>Attribute</b>	<b>District ID No.</b> – <i>If there is not yet a District ID number, give each withdrawal point an Owner ID No.</i>		
<b>Status</b>	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> Standby <input type="checkbox"/> Dismantled		
<b>Function – Choose from the list to the right.</b>	<input type="checkbox"/> Agriculture (general-non-irrigation) <input type="checkbox"/> Irrigation <input type="checkbox"/> Aquaculture <input type="checkbox"/> Livestock <input type="checkbox"/> Augmentation <input type="checkbox"/> Power <input type="checkbox"/> Environmental <input type="checkbox"/> Pressure Test <input type="checkbox"/> Fire Suppression <input type="checkbox"/> Recreation (general) <input type="checkbox"/> Industrial-Commercial <input type="checkbox"/> Repump		
<b>Alternative Water Supply Type Choose from the list to the right.</b>	<input type="checkbox"/> Reclaimed water from a wastewater treatment plant <input type="checkbox"/> Captured storm water <input type="checkbox"/> Industrial waste water <input type="checkbox"/> Settling pond <input type="checkbox"/> Industrial process byproduct <input type="checkbox"/> Brackish ground water <input type="checkbox"/> Brackish surface water <input type="checkbox"/> Recycled, re-circulated or other reused process water <input type="checkbox"/> Seawater (even though a WUP is not required seawater use)		

**INDIVIDUAL WATER USE PERMIT APPLICATION**

ALTERNATIVE WATER SUPPLY WITHDRAWAL POINT TABLE (continued)

<p><b>Facility Type -</b> Method used to deliver the alternative water supply, as well as those used for delivery to the site of use. Indicate "I" for inflow and "R" for re-pump.</p>	<p><b>Inflow (I)</b>  <input type="checkbox"/> Pressurized Pipe (PP) reclaimed water line from an off-site wastewater treatment facility  <input type="checkbox"/> Non-pressurized pipe (NP) reclaimed water line from an off-site wastewater treatment facility</p> <p><b>Repump* (R)</b>  <input type="checkbox"/> From a lined holding pond  <input type="checkbox"/> From an unlined holding pond/reservoir  <input type="checkbox"/> Tank  <input type="checkbox"/> Self-supplied (generated onsite)</p>		
<p><b>Pump Capacity</b> – Gallons per minute (gpm) pump can produce.</p>			
<p><b>Mainline Diameter</b> – Outside diameter of pipe to facility or end use. For repump facilities, withdrawal pipe outside diameter.</p>	inches	inches	
<p><b>Metered</b> – If not metered, explain how quantities delivered/created are measured.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p><b>Meter Type</b> <input type="checkbox"/> Totalizing Flow (TF) <input type="checkbox"/> Digital (D) <input type="checkbox"/> Hourly (H) Indicate units if other than gallons</p>			
<p><b>Meter Owner</b> – If supplier meters in-flow line, that meter can be used to measure delivery if applicant has access. If not, another meter must be installed at the point of in-flow.</p>	<input type="checkbox"/> Applicant <input type="checkbox"/> Supplier	<input type="checkbox"/> Applicant <input type="checkbox"/> Supplier	
<p><b>Meter Serial Number</b> – If unknown, assign a number and put into parentheses.</p>			
<p><b>Expected Minimum Monthly Delivery</b> – Minimum quantity to be supplied each month, when available, as listed in contract or agreement.</p>	gallons/month	gallons/month	
<p><b>Number of Months/Year Reliability</b> – Number of month/year supply will most likely be available, in order to set aside standby quantities (if any).</p>	months	months	
<p><b>Expected Annual Average</b> – Quantity to receive or generate each year, divided by 365. If reliability is less than 12 months per year, prorate accordingly.</p>	gpd	gpd	
<p><b>Expected Peak Month</b> – Quantity to receive or generate during the highest month AWS output</p>	gpd	gpd	
<p><b>Expected Maximum Daily</b> – Highest quantity to be received on any single day</p>	gpd	gpd	
<p><b>Date Available</b> – First month/year of service expected or month/year existing service began.</p>	____ / ____ mm yy	____ / ____ mm yy	

\* **Repump** describes a facility that withdraws from a containment (pond or lake) that is augmented by another source.

If any part of the alternative water supply claimed is storm water captured for use on-site, calculations and documentation for the amount of storm water to be counted toward alternative water supply use, per catchment, must be provided. Include documentation that the capture of this amount of stormwater runoff does not adversely impact the watershed, environment, existing legal users, and off-site land use.

Attached  Not applicable

**Connected Alternative Water Supply Sites**

Augmentation-Repump Relationship

Complete the table below for all alternative water supply withdrawal points related via an augmentation-repump system. Show all Owner ID numbers for augmentation sources related to a single repump source (for instance, if an alternative water supply augmentation source is put into a storage facility that also receives ground water, show both of the Owner ID numbers for augmenting reclaimed water and augmenting groundwater sources). Provide a storage facility name (Pond No. 7; East Pond, Tank B, etc.). If it is in-ground storage, indicate whether or not it is lined with water-

**INDIVIDUAL WATER USE PERMIT APPLICATION**

impermeable material or unlined by adding an “L” or “UL” after the name. If there is not yet a District ID number, only indicate the Owner ID number for the withdrawal point.

**CONNECTED AWS SITES TABLE**

Augmentation Source		Augmentation Storage Facility Name (L or UL)	Storage Volume (gallons)	Repump District ID/Owner ID No.	Additional Stormwater Runoff Annual Average Quantity*
District ID Number	Owner ID Number				

\* If additional stormwater quantities are attributed to this storage facility, indicate the amount here.

Are any groundwater wells or surface water withdrawals from lakes, streams or other traditional sources planned to also augment these storage facilities?

Yes       No

If “yes,” describe associations and how much is expected to be pumped into the storage facility from each:

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**Withdrawal Points on Standby for Alternative Water Supply**

A “**full standby**” withdrawal point is not used routinely except to provide backup when another source becomes unusable or unavailable for a limited time. Its “routinely used” quantity is zero. A “**partial standby**” withdrawal point has quantities permitted for routine use **and** quantities to provide backup when another source becomes unusable or unavailable for a limited time. A quantity is required in columns C & D.

Provide the following information for any arrangement among withdrawal points on the permit where a withdrawal point is used occasionally to provide backup quantities for another source. You may make a photocopy of this page for additional standby withdrawal points.

A		B		C	D
Withdrawal Point on Standby		Withdrawal point Backed Up		Routinely Used Annual Average Quantity (gpd)	Standby Annual Average Quantities (gpd)
District ID No.	Owner ID No.	District ID No.	Owner ID No.		

**TOTAL DEMAND QUANTITIES**

**TOTAL DEMAND QUANTITIES** – Sum the demand itemized in Parts VI, VII, and VIII.

Annual Average Daily		Peak Month		Maximum Daily	
Ground Water:	_____ gpd	Ground Water:	_____ gpd	Ground Water:	_____ gpd
Surface Water:	_____ gpd	Surface Water:	_____ gpd	Surface Water:	_____ gpd
Alternative Water:	_____ gpd	Alternative Water:	_____ gpd	Alternative Water:	_____ gpd
Imported Water:	_____ gpd	Imported Water:	_____ gpd	Imported Water:	_____ gpd

**PART IX. MONITOR SITES**

If there are any monitor sites, including withdrawal points also used for monitoring, complete the table on the next page using the codes below. If you are not the owner of the monitor site, provide owner's name and disregard the "frequency" category.

There are no monitor sites on this property (skip to next section)

**MONITOR TYPES**

<b>Code</b>	<b>Description of Device</b>	
<b>DM</b>	Discharge meter	<i>Discharge through a pipe</i>
<b>EM</b>	Effluent meter	<i>Discharge from a treatment plant or meter at a reuse customer's site</i>
<b>EP</b>	Evaporation Pan	<i>Evaporation; usually associated with a surface water body</i>
<b>ES</b>	Environmental Site	<i>Usually a wetland, lake, riverine environment or estuary</i>
<b>F</b>	Flume	<i>Narrows flow and measures height in flume for discharge rate</i>
<b>FM</b>	Flow Meter	<i>Measures stream flow, or discharge from a site, not from a WD point.</i>
<b>MW</b>	Monitor Well	<i>Monitor ground water</i>
<b>PM</b>	Piezometer	<i>Monitor ground water</i>
<b>RG</b>	Rain Gauge	<i>Rainfall</i>
<b>SG</b>	Staff Gauge	<i>Flow rate or surface water body level indicator</i>
<b>SS</b>	Sample Site	<i>Sample Site at the surface (land, lake stream, spring, estuary, etc.)</i>
<b>TM</b>	Thermometer	<i>Temperature measurement.</i>
<b>WR</b>	Weir	<i>Flow rate or level indicator</i>

**MONITOR USES**

<b>Code</b>	<b>Description of Use</b>	
<b>AL</b>	Aquifer Levels	<i>Water levels in wells</i>
<b>DF</b>	Discharge Flow	<i>Flow from site or facility</i>
<b>EA</b>	Environmental Monitoring	<i>Water inflow to an augmented environmental site</i>
<b>HB</b>	Hydraulic Barrier	<i>Limit function to PM and SG</i>
<b>LL</b>	Surface water body water level	<i>Lake, pond, reservoir, riverine impoundment</i>
<b>MP</b>	Mine pit water levels	<i>Dewatering level</i>
<b>RF</b>	Rainfall	<i>Local precipitation</i>
<b>S</b>	Salinity	<i>Salinity of a surface water body</i>
<b>SA</b>	Salt Water Wedge	<i>Tidal function in an estuary</i>
<b>SF</b>	Stream flow	<i>Stream flow of canal, stream, river</i>
<b>SI</b>	Aquifer Saline Water Interface	<i>Monitor well placed at the saline water interface in an aquifer</i>
<b>SW</b>	Aquifer Saline Water Intrusion	<i>Monitor well inland of saline water interface</i>
<b>TA</b>	Temperature of Air	<i>As stated</i>
<b>TB</b>	Water Turbidity	<i>As stated</i>
<b>TW</b>	Temperature of Water	<i>This can be surface water or groundwater</i>
<b>U</b>	Contamination Plume	<i>Monitors location and concentration of contaminant plume in aquifer</i>
<b>WF</b>	Wetland Function	<i>Functionality health of a wetland</i>
<b>WL</b>	Wetland Water Level	<i>Surface water levels in a wetland</i>
<b>WQ</b>	Water Quality	<i>Surface or ground water quality samples</i>
<b>RE</b>	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**MONITOR SITE INFORMATION TABLE**

	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
<b>District ID No.</b>				
<b>Owner Name</b> ( <i>Applicant, SWFWMD, USGS, FGS, etc</i> )				
<b>Type</b> ( <i>Reference "MONITOR TYPES" codes previous page</i> )				
<b>Use</b> ( <i>Reference "MONITOR USES" codes previous page</i> )				
<b>Frequency</b> – ( <i>Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate)</i> )				

**PART X. IMPACTS**

**General Instructions**

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

- Non-groundwater flow impact assessment attached. Full documentation is required.
- Ground water flow model attached. See "Water Use Permit Information Manual", Part C, Water Use Design Aids, which contains, "Ground Water Modeling Impact Analysis And Reporting Guidelines" that the applicant may choose to use to assist the applicant in the design and submittal of ground water flow models in support of a WUP application. It is attached to this document for the applicant's convenience, but it is not part of the application.
- Mitigation Plan Attached
- Impacts are predicted to not be adverse. Documentation and explanation attached.

**Off-site Features:**

If a ground water model was used, in the output map, show the locations of:

- Other wells\* not owned by the applicant, including domestic wells, irrigation wells, public supply wells, etc. within the radius of impact.

\***Domestic wells** are not shown on District maps; therefore, it is the applicant's responsibility to plot them on the map. However, a list of most of the domestic wells is available from the District by Section-Township-Range which can assist the applicant. For the domestic wells, provide the total depth, casing depth and the depth to which the pump is set, all in feet below land surface.

- Wetlands: Show all off-site wetlands that are located within the 0.1 ft. of drawdown at the surface
- New Quantities in the Southern Water Use Caution Area** - If this application is for new quantities in the SWUCA, the impact assessment must include impacts to Minimum Flows and Levels. See the SWUCA and Dover/Plant City WUCA Supplemental Form.

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**New Quantities that Impact the Dover/Plant City WUCA Minimum Aquifer Level Protection Zone:** If this application is for new frost/freeze protection quantities from groundwater in the Dover/Plant City WUCA, an impact assessment must be included. In these cases, the "Dover/Plant City WUCA Supplemental Form"(Form No. LEG-R050.00 (12/10)) must be completed.

**PART XI. PROFESSIONAL CERTIFICATION**

Any interpretation of geologic or hydrogeologic conditions or parameters in this application must be dated, signed and sealed by a qualified professional who has the expertise and training to make geological and hydrogeological interpretations pursuant to chapters 492 and/or 471, Florida Statutes (F.S.).

I hereby certify that I am a qualified professional pursuant to chapters  492 F.S. or  471 F.S. (check one) to make geological and hydrogeological interpretations for this water use permit application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
License No.

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Print Name

**PART XII. APPLICANT/OWNER CERTIFICATION**

All landowners described in this application must be included as applicants of this permit. Attach all signatures to a document that attests that they are aware of this application and agree to its content, or that they have empowered the signer below with authority to submit this application on their behalf.

Attached     Not applicable

**BUSINESS ENTITY AS APPLICANT** – If the permit applicant is a business entity, indicate the type of business entity below and provide the name and title of the person signing on behalf of the business entity. Attach documentation of the status of the business entity to legally operate in the State of Florida, such as a copy of the last corporate annual report submitted to the Florida Department of State or a Certificate of Status issued by Florida Department of State.

Florida Corporation

Florida General Partnership

Florida Limited Liability Company

Florida Limited Partnership

Foreign Corporation/Partnership

Trust

Other: \_\_\_\_\_

I hereby certify that the information contained herein is true and accurate and that I have legal authority to undertake the activities described herein and execute this application.

\_\_\_\_\_  
Applicant Signature/Consultant or Contact Signature\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and title if signing as business entity applicant

\* A consultant or contact must include signed documentation of authority to sign and submit this application.

**INDIVIDUAL WATER USE PERMIT APPLICATION**

**LIST OF ATTACHMENTS**

	Attached	Not applicable
• Documentation of ownership	<input type="checkbox"/>	<input type="checkbox"/>
• Copy of current lease	<input type="checkbox"/>	<input type="checkbox"/>
• Service Agreement	<input type="checkbox"/>	<input type="checkbox"/>
• Description of "other legal property control"	<input type="checkbox"/>	<input type="checkbox"/>
• MSSW/ERP/AGSWM	<input type="checkbox"/>	<input type="checkbox"/>
• Contract or agreement with offsite water supplier	<input type="checkbox"/>	<input type="checkbox"/>
• Historic documentation of imported water, reclaimed or other alternative water supply	<input type="checkbox"/>	<input type="checkbox"/>
• Copy of caliper or video logs	<input type="checkbox"/>	<input type="checkbox"/>
• Alternative water supply feasibility report	<input type="checkbox"/>	<input type="checkbox"/>
• Stormwater capture calculations	<input type="checkbox"/>	<input type="checkbox"/>
• Impact assessment/analysis	<input type="checkbox"/>	blank by intention
• Professional certifications	<input type="checkbox"/>	blank by intention
• Co-owner signature authority document	<input type="checkbox"/>	<input type="checkbox"/>
• Consultant or Contact signature authority document	<input type="checkbox"/>	<input type="checkbox"/>
• SWUCA Supplemental Form	<input type="checkbox"/>	<input type="checkbox"/>
• Dover/Plant City WUCA Supplemental Form	<input type="checkbox"/>	<input type="checkbox"/>

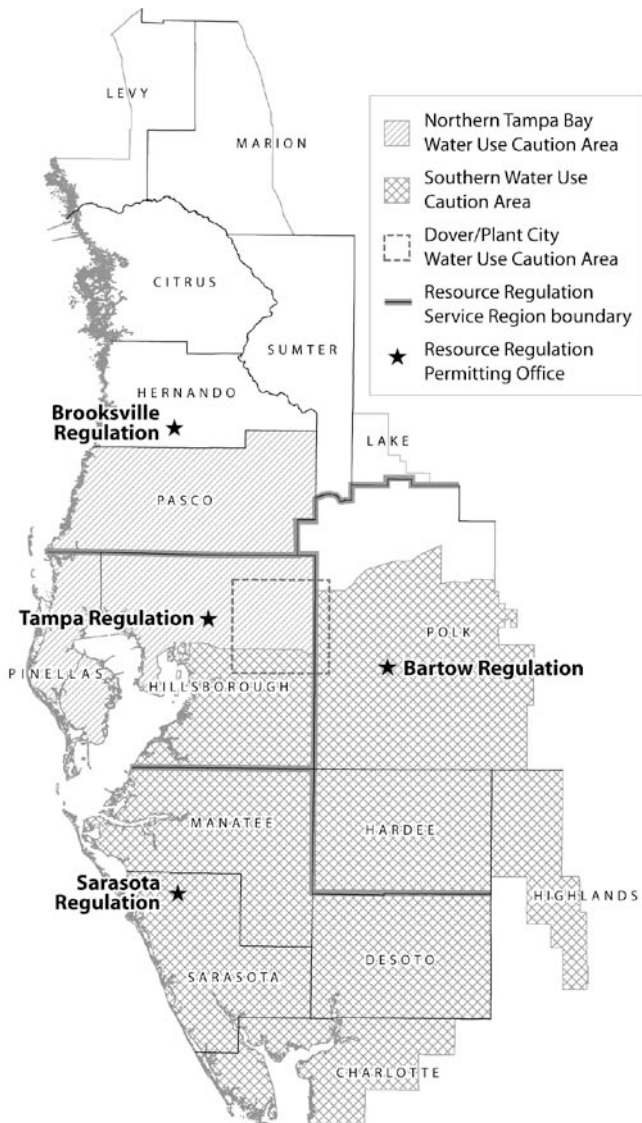


## *Southwest Florida Water Management District*

Applicants for water use and environmental resource permits may submit their applications to any District Permitting Office; however, it is recommended to submit them to the Permitting Office within the Service Region where their property is located. All activities concerning these permits will be conducted at these Permitting Offices. Applications for well construction permits may also be submitted to any Permitting Office; however, applications for well construction permits in Marion, Sarasota and Manatee Counties are evaluated and issued locally by county agencies.

### Resource Regulation Service Regions

### Resource Regulation Permitting Offices



#### Brooksville Regulation Department

*Citrus, Hernando, Lake, Levy, Marion, Pasco, Sumter counties.*

2379 Broad Street  
Brooksville, FL 34604-6899  
(352) 796-7211 or 1-800-423-1476 (FL only)  
Fax: (352) 540-6027; Suncom: 628-4150

#### Tampa Regulation Department

*Hillsborough, Pinellas counties.*

7601 U.S. Hwy. 301  
Tampa, FL 33637-6759  
(813) 985-7481 or 1-800-836-0797 (FL only)  
Fax: (813) 987-6747; Suncom: 587-2070

#### Bartow Regulation Department

*Hardee, Highland, Polk counties.*

170 Century Boulevard  
Bartow, FL 33830-7700  
(863) 534-1448 or 1-800-492-7862 (FL only)  
Fax: (863) 534-7058; Suncom: 572-6200

#### Sarasota Regulation Department

*Charlotte, DeSoto, Manatee, Sarasota counties.*

6750 Fruitville Road  
Sarasota, FL 34240-9711  
(941) 377-3722 or 1-800-320-3503 (FL only)  
Fax: (941) 373-7660; Suncom: 531-6900

**TDD: 1-800-231-6103 (FL only) for hearing assistance for all locations.**

The Southwest Florida Water Management District (District) does not discriminate on the basis of disability. This nondiscrimination policy involves every aspect of the District's functions, including access to and participation in the District's programs and activities. Anyone requiring reasonable accommodation as provided for in the Americans with Disabilities Act should contact the District's Human Resources Director, 2379 Broad Street, Brooksville, Florida 34604-6899; telephone (352) 796-7211, ext. 4702 or 1-800-423-1476 (FL only), ext. 4702; TDD (FL only) 1-800-231-6103; or email to ADACoordinator@swfwmd.state.fl.us.