This application should be completed and emailed with the appropriate calculations and map to <u>Lisa.Laupert@swfwmd.state.fl.us</u> by 5:00PM on October 2, 2020.

#### **Applicant Information**

**Entity Name:** 

Is the Entity designated as an economically disadvantaged community?

Project Manager Name:

Project Manager Address:

Project Manager Phone Number:

Project Manager Email Address:

### **Project General Information**

Project Name:

Project Type:

### **Project Benefit**

Quantity of Water Made Available (mgd):

Land Acquisition (acres):

Nitrogen Reduced (lbs/year):

Sediment Reduced (lbs/year):

Please download the the FDEP Springs Funding guidance document. Benefit calculations should be provided demonstrating how the benefit calculation was derived. A Map should be included showing the area of the project and depict notable features.

No

### **Project Detail Information**

Is this a multiyear project? Yes

Note: For multiyear funding request, please download the multiyear funding request spreadsheet, complete the form, and send in with this application.

No

Please provide a full description of the project. For multiyear funded projects, please provide a description of the complete project, beginning to end, and a description explaining what phase will be covered by this funding request application.



What is the anticipated start and end date for the work that will be conducted under this funding request?

Start Date: End Date:

#### **Project Location Information (please submit a map with this application)**

County

Latitude (decimal degrees)

Longitude (decimal degrees)

What is the spring name that will receive the benefit?

Is this spring deemed impaired?

What is the distance from the project to the spring receiving the benefit?

Is this project in a springshed? If so, specify which one.

Is this project within a BMAP boundary? Yes No

Is this project within a PFA boundary? Yes No

Is this project listed in the BMAP project list? Yes No No, but will be in an update

Is this project listed in a recovery strategy, prevention strategy, or regional water supply plan as benefiting an MFL?

Yes No

Please list any restoration plans, prevention plans, recovery plans, or long term local water quality or quantity strategy plans this project is part of.

### **Project Funding Information**

Are you applying for CFI funding this fiscal year? Yes No

Have you received springs funding or CFI funding for this project in the past? Yes No

Enter the funding amount that has been received and/or is being requested:

|               | Previous | FY2022 | Future | Total |
|---------------|----------|--------|--------|-------|
| FDEP Springs  |          |        |        |       |
| Funding       |          |        |        |       |
| WMD CFI       |          |        |        |       |
| Funding       |          |        |        |       |
| Local Funding |          |        |        |       |
| Other Funding |          |        |        |       |
| Total         |          |        |        |       |

In the event this project is not awarded CFI funding, please use the table below to reflect how the costs will be handled without CFI funding. If CFI funding was not applied for, please move to the next section.

|                         | Previous | FY2022 | Future | Total |
|-------------------------|----------|--------|--------|-------|
| FDEP Springs<br>Funding |          |        |        |       |
| Local Funding           |          |        |        |       |
| Other Funding           |          |        |        |       |
| Total                   | •        |        |        |       |

Please download the the FDEP Springs Funding guidance document. Benefit calculations should be provided demonstrating how the benefit calculation was derived. A Map should be included showing the area of the project and depict notable features.

Provide any additional information below that is pertinent to the review of this application. Include information on any existing ordinances, capital improvement plans, or master plans.



## Don't forget to submit

- -Benefit Calculations
- -Map
- -Form A (Wastewater Collection and Treatment Projects)
- -Form B (Water Quantity Projects & Reuse)
- -Form C (Land Acquisition Projects)

Please contact Frank Gargano with any questions prior to submittal. Frank.Gargano@swfwmd.state.fl.us

# Form A: Wastewater Collection & Treatment Projects Only

| What is the name of the wastewater treatment facility where the project intends to s   | send flows once | connected to sewer: |
|--|-----------------|---------------------|
| What level of treatment is offered at the wastewater treatment facility?   |                 |                     |
| At the wastewater treatment facility, where is the final treated wastewater sent?  |                 |                     |
| What is the current capacity of the wastewater treatment facility (mgd)?   |                 |                     |
| What is the annual average of flow received by the wastewater treatment facility (n  | ngd)?           |                     |
| What is the annual average of total nitrogen leaving the treatment facility (mg/L)?  |                 |                     |
| How much additional flow will be received by the treatment facility due to the projection  | ct (mgd)?       |                     |
| Please describe any proposed costs for the resident/property owner for connection and/or impact fees be charged? If so, how much are the fees? What will the fees of |                 | connection          |
| Is any land acquisition necessary? If so, please describe below.   | Yes             | No                  |
| What length of forcemain and pipe sizing is necessary? Please describe below.  |                 |                     |

## Form A: Wastewater Collection & Treatment Projects Only

## **Septic to Sewer Conversion Projects Complete this Section:**

| How many septic tanks will be connected to sewer through this project?  |
|---|
| How many of the septic tanks in this project are commercial tanks?  |
| If commercial tanks are included in this project, provide type of commercial use and square footage of the associated buildings below.  |
| How many of the septic tanks service multi-family homes?  |
| Is there a local ordinance in place that requires proper abandonment of a septic system and connection to an available sewerage system, as defined by in Section 381.0065(21), Florida Statutes (F.S.)?  Yes  No  If there are more requirements to the local ordinance, such as limiting future installation of septic systems, please describe and reference the ordinance below. |
| Package Plant Conversion Projects Complete this Section:  |
| What is the annual average flow (actual, not permitted) from the package plant (mgd)?   |
| What is the annual average concentration (actual, not permitted) of total nitrogen (mg/L)?  |

# Form B: Water Quantity Projects

| For Agricultural Projects associated with irrigation system efficiency improvements:                  |
|---|
| Proposed irrigation system efficiency (%):  |
| Prior irrigation system efficiency (%):   |
| Average metered water use for the past 5 years (mgd):   |
| For Reclaimed Water Projects:   |
| <b>Note</b> : Refer to Appendix D of the Springs Funding Guidance for how to calculate the following: |
| Projected Reuse Flow (mgd):   |
| Percent Offset (%):   |
| Was Percent Offset determined by Table 1 of the Springs Funding Guidance?                             |
| Yes No Percent Recharge (%):  |

# Form C: Land Acquisition Projects Only

| What is the current landuse? If mixed, please depict acreage for each land use.  |
|--|
| What will be the landuse once purchased?   |
| What is the recharge potential (mgd)?  |
| Does a portion of the land to be acquired lie outside of the BMAP?   |
| Yes  |
| Please note, the portion of land outside of a BMAP for a land acquisition project should not be included in reporting acreage preserved. |