This application should be completed and emailed with the appropriate calculations to danielle.rogers@swfwmd.state.fl.us by 5:00PM, October 5, 2018.

Дp	plicant	Inform	ation

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 (please attach your calculations to the application):

Quantity of Water Made N Reduced (lbs/yr):

Available (mgd): Sediment

Land Acquisition (acres): reduced (lbs/yr):

Project Description (Please identify if this is a multiyear funded project. If this is a multiyear funded project, 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 date and end date for the work that will be conducted under this funding request?

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? No, but will be in an update Yes No

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

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

Land Acquisition Projects Only
What is the recharge potential?
What is the current landuse?

benefiting an MFL?

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 request

	Previous	FY2020	Future	Total
FDEP Springs				
Funding				
WMD CFI				
Funding				
Local Funding				
Other Funding				
Total				

If this is a multiyear funding request, please download the multiyear funding request spreadsheet, complete, and send in with this application.

Please download the the FDEP Springs Funding guidance document. Calculations should be provided demonstrating how the benefit calculation was derived. 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 the benefit calculations and a map with the application.