



ENVIRONMENTAL RESOURCE PERMIT APPLICATION

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
2379 BROAD STREET, BROOKSVILLE, FL 34604-6899
(352) 796-7211 OR FLORIDA WATS 1 (800) 423-1476

FOR AGENCY USE ONLY

ACOE Application # _____	DEP/WMD Application # _____
Date Received _____	Date Received _____
Proposed Project Latitude _____ ° _____ ' _____ "	Fee Received \$ _____
Proposed Project Longitude _____ ° _____ ' _____ "	Fee Receipt # _____

SECTION A

PART 1:

Are any of the activities described in this application proposed to occur in, on or over wetlands or other surface waters? ☐ yes ☐ no

Is this application being filed by or on behalf of an entity eligible for a fee reduction? ☐ yes ☐ no

PART 2:

A. Type of Environmental Resource Permit requested (check at least one)

- ☐ Noticed General - include information requested in Section B.
- ☐ Standard General (single family dwelling) - include information requested in Sections C and D.
- ☐ Standard General (all other projects) - include information requested in Sections C and E.
- ☐ Standard General (minor systems) - include information requested in Sections C and H.
- ☐ Standard General (borrow pits) - include information requested in Sections C and I.
- ☐ Individual (single family dwelling) - include information requested in Sections C and D.
- ☐ Individual (all other projects) - include information requested in Sections C and E.
- ☐ Individual (borrow pits) - include information requested in Sections C and I.
- ☐ Conceptual - include information requested in Sections C and E.
- ☐ Mitigation Bank (construction) - include information requested in Section C and F.
(If the proposed mitigation bank involves the construction of a surface water management system requiring another permit listed above, check the appropriate box and submit the information requested by the applicable section.)
- ☐ Mitigation Bank (conceptual) - include information requested in Section C and F.

B. Type of activity for which you are applying (check at least one)

- ☐ Construction or operation of a new system, including dredging or filling in, on or over wetlands and other surface waters. (If reapplying for an expired, denied or withdrawn permit/application, please provide previous permit # _____.)
- ☐ Alteration or operation of an existing system which was not previously permitted by SWFWMD or DEP.
- ☐ Modification of a system previously permitted by SWFWMD or DEP. Provide previous permit # _____ and check applicable modification type.
 - ☐ Alteration of a system
 - ☐ Extension of permit duration
 - ☐ Abandonment of a system
 - ☐ Construction of additional phases of a system
 - ☐ Removal of a system

C. Are you requesting authorization to use State owned Submerged Lands? ☐ yes ☐ no If yes, include the information requested in Section G.

D. For activities in, on or over wetlands or other surface waters, check type of federal dredge and fill permit requested:

- ☐ Individual
- ☐ Programmatic General
- ☐ General
- ☐ Nationwide
- ☐ Not applicable

E. Are you claiming to qualify for an exemption? ☐ yes ☐ no

If yes, provide rule number if known: _____.

PART 3: A. Owner(s) of Land	B. Applicant (if other than owner)
NAME	NAME
COMPANY AND TITLE	COMPANY AND TITLE
ADDRESS	ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE () FAX ()	TELEPHONE () FAX ()
C. Agent Authorized to Secure Permit (if an agent is used)	D. Consultant (if different from agent)
NAME	NAME
COMPANY AND TITLE	COMPANY AND TITLE
ADDRESS	ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
TELEPHONE () FAX ()	TELEPHONE () FAX ()
PART 4: Project Information A. Name of project, including phase if applicable: _____ B. Is this application for part of a multi-phase project? <input type="checkbox"/> yes <input type="checkbox"/> no C. Total applicant-owned area contiguous to the project: _____ acres D. Total project area for which a permit is sought: _____ acres E. Total impervious and semi-impervious area for which a permit is sought: _____ acres F. Total area (metric equivalent for federally funded projects) of work in, on or over wetlands or other surface waters: _____ acres or _____ square feet (_____ hectares or _____ square meters) G. Total number of new boat slips proposed: _____	

PART 5: Project Location (use additional sheets, if needed)

County(ies) _____
Section(s) _____ Township _____ Range _____
Section(s) _____ Township _____ Range _____
Land Grant name, if applicable _____
Tax Parcel Identification Number _____
Street address, road, or other location _____
City, ZIP Code, if applicable _____

PART 6: Identity of Applicants

Is the permit applicant one of the following (please check if applicable):

- _____ Florida corporation
_____ Florida limited liability company
_____ Florida limited partnership
_____ Florida general partnership
_____ Foreign corporation/partnership
_____ Trust

If so, please include with application documentation of status of applicant to legally operate in the State of Florida (e.g., copy of last corporate annual report submitted to the Florida Department of State).

PART 7: Describe in General Terms the Proposed Project, System or Activity:

PART 8:

- A.** If there have been any pre-application meetings for the proposed project, with regulatory staff, please list the date(s), location(s), and names of key staff and project representatives.

Date(s)	Location(s)	Names
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- B.** If this project has been previously reviewed through the FDOT Efficient Transportation Decision Making (ETDM) process, provide the ETDM project review number(s) assigned by FDOT:

- C.** Please identify by number any MSSW/WRM (dredge & fill)/ERP/ACOE permits or applications pending, issued or denied and any related enforcement actions at the proposed project site.

Agency	Date	Number/ Type	Action Taken
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- D.** Note: The following information is required for projects proposed to occur in, on or over wetlands that need a federal dredge and fill permit and/or authorization to use state owned submerged lands. Please provide the names, addresses and ZIP codes of property owners whose property directly adjoins the project (excluding applicant) and/or is located within a 500 foot radius of the project boundary (for proprietary authorizations, if any). Please provide a drawing identifying each owner and adjoining property lines. (Use additional sheets, if needed).

1.	_____	2.	_____
	_____		_____
	_____		_____
	_____		_____
3.	_____	4.	_____
	_____		_____
	_____		_____
	_____		_____
5.	_____	6.	_____
	_____		_____
	_____		_____
	_____		_____

PART 9:

- A.** By signing this application form, I am applying, or I am applying on behalf of the owner or applicant, for the permit and/or proprietary authorizations identified above, according to the supporting data and other incidental information filed with this application. I am familiar with the information contained in this application, and represent that such information is true complete and accurate. I understand that knowingly making any false statement or representation in the application is a violation of Section 373.430, F.S. and 18 U.S.C. Section 1001. I understand this is an application and not a permit and work prior to approval is a violation. I understand that this application and any permit or proprietary authorization issued pursuant thereto, does not relieve me of any obligation for obtaining any other required federal, state, water management district or local permit prior to commencement of construction. I agree, or I agree on behalf of the owner or applicant, to operate and maintain the permitted system unless the permitting agency authorizes transfer of the permit to a responsible operation entity.

Typed/Printed Name of Owner, Applicant or Agent	Corporate Title, if applicable
Signature of Owner, Applicant or Agent	Date

B. AN AGENT MAY SIGN ABOVE ONLY IF THE FOLLOWING IS COMPLETED:

I hereby designate and authorize the agent listed above to act on my behalf, or on behalf of my corporation, as the agent in the processing of this application for the permit and/or proprietary authorization indicated above; and to furnish, on request, supplemental information in support of the application. In addition, I authorize the above-listed agent to bind me, or my corporation, to perform any requirement which may be necessary to procure the permit or authorization indicated above.

Typed/Printed Name of Owner, Applicant or Agent	Corporate Title, if applicable
Signature of Owner or Applicant	Date

C. PERSON AUTHORIZING ACCESS TO THE PROPERTY MUST COMPLETE THE FOLLOWING:

I either own the property described in this application or I have legal authority to allow access to the property, and I consent, after receiving prior notification, to any site visit on the property by agents or personnel from the Department of Environmental Protection, the Southwest Florida Water Management District and the U.S. Army Corps of Engineers necessary for the review and inspection of the proposed project specified in this application. I authorize these agents or personnel to enter the property as many times as may be necessary to make such review and inspection. Further, I agree to provide entry to the project site for such agents or personnel to monitor authorized work if a permit is granted.

Typed/Printed Name	Corporate Title, if applicable
Signature	Date

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- D.** I certify that the engineering features of this surface water management system have been designed by me or under my responsible charge and in my professional opinion conform with sound engineering principles and all applicable rules and specifications. I further agree that I or my engineering firm will furnish the applicant/ permittee with a set of guidelines and schedules for maintenance and operation of the surface water management system.

By:	Signature of Engineer of Record	Name (please type)	FL P.E. No.
	• AFFIX SEAL •	Company Name	
Date:		Company Address	
Phone: ()		City, State, ZIP	