# NOTICE OF INTENT TO USE A WATER USE NOTICED GENERAL PERMIT



South Florida Water Management District
P.O. Box 24680, West Palm Beach, Florida 33416-4680 (561) 686-8800
<a href="https://www.sfwmd.gov/ePermitting">www.sfwmd.gov/ePermitting</a>

**Instructions**: This form is to be used for projects that qualify for a Noticed General Permit in accordance with Rule 40E-2.071, F.A.C. Noticed General Permits are provided for certain activities that have been determined to have minimal impacts to the water resources of the state when conducted in compliance with the terms and conditions of the general permit. Dewatering and Diversion and Impoundment projects are not eligible for a Noticed General Permit.

To qualify for a Noticed General Permit, the project must meet all of the following Allocation, Facility and Source criteria. If your project does not satisfy all of these requirements, please complete a form for an Individual Permit.

#### **ALLOCATION:**

- The cumulative average daily water use is less than 100,000 gallons per day (GPD) on an annual basis;
- Does not exceed an annual average allocation greater than or equal to 300,000 GPD for irrigation purposes within the South Dade County Water Use Basin as depicted in Figure 21-11, Chapter 40E-21, F.A.C.;
- Does not exceed an annual average allocation greater than or equal to 10,000 GPD within the Lower Tamiami, Sandstone and Mid-Hawthorn aquifers as depicted in Figures 2-1, 2-2 and 2-3, Chapter 40E-2, F.A.C.;

#### FACILITY:

- Are from facilities having a cumulative withdrawal capacity of less than 1,000,000 GPD;
- Are from groundwater wells less than eight (8) inches in diameter;
- Are from surface water facilities which have a cumulative intake diameter less than six (6) inches;
- Are consistent with requirements of any applicable mandatory reuse zones, and

**Note**: Projects in the South Dade County Water Use Basin are exempt from the facility criteria indicated above.

## Source:

- Does not use surface water from the C-23, C-24, C-25, L-1, L-2 or L-3 Canal Systems;
- Does not use surface water within the Lake Istokpoga/Indian Prairie Canal System as identified in Figures 21-20 and 21-21, Chapter 40E-21, F.A.C.;
- Does not use surface or groundwater within the Picayune Strand or Fakahatchee Estuary, groundwater indirectly from the Picayune Strand or Fakahatchee Estuary or any canal identified in Figure 3-6 of the Applicant's Handbook, or surface water indirectly from any canal identified in Figure 3-6 of the Applicant's Handbook;
- Does not use surface water from the Lower East Coast Everglades Waterbodies or the North Palm Beach County/Loxahatchee River Watershed Waterbodies identified in Figures 3-1 and 3-2 of the Applicant's Handbook and the integrated conveyance system.
- Does not use surface water from the Nearshore Central Biscayne Bay Reservation canal reaches as identified in Figure 3-1, Chapter 40E-10, F.A.C.

# WATER USE PERMIT # (if application is for renewal or modification): If necessary, attach additional sheets if there are multiple applicants, owners, agents, etc. 1. **APPLICANT** (Complete legal name in which permit should be issued) NAME: If applicant is a business, provide a contact person: ADDRESS: CITY, STATE, ZIP: PHONE: ( ) CELL PHONE: ( ) EMAIL ADDRESS: Applicant is: ☐ Owner ☐ Lessee\* ☐ Agent/Consultant ☐ Other (explain)\_\_\_\_\_ \*Date lease expires (mm/dd/yyyy)\_\_\_\_\_\_\_ Is lease automatically renewable □ No □ Yes 2. **OWNER** (If different than applicant) NAME: ADDRESS: CITY, STATE, ZIP: PHONE: (\_\_\_\_\_) \_\_\_\_ CELL PHONE: (\_\_\_\_\_) \_\_\_\_ EMAIL ADDRESS: 3. AGENT OR CONSULTANT NAME:\_\_\_\_\_COMPANY NAME (if applicable): \_\_\_\_\_ ADDRESS: CITY, STATE, ZIP: PHONE: (\_\_\_\_\_) \_\_\_\_ CELL PHONE: (\_\_\_\_\_) \_\_\_\_ EMAIL ADDRESS: SECTION II – APPLICATION INFORMATION Refer to the Applicant's Handbook for permit application guidance, located online at www.sfwmd.gov. If any fields are not applicable for the proposed use, write N/A in the field. 1. TYPE OF APPLICATION: □ New Modification □ Renewal If this application is for a modification, please describe the modification request and the reason the modification is necessary. 2. PROJECT NAME: \_\_\_\_\_ COUNTY: \_\_\_\_\_ PHYSICAL ADDRESS: \_\_\_\_\_

SECTION I – CONTACT INFORMATION

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3. **RELATED PERMITS** (for projects other than Public Supply)

	<b>D</b>	· D	··- (5DD)	<b>7</b> / <b>A</b>		<b>N</b> 1 (2)				
			SECTIO	ON III – USE	CAT	EGORY	,			
Please check all	applicable	water us	se categor	ries associat	ed wi	th this p	roject.			
☐ Agricultural	□ Comm	ercial /	Industria	I 🛭 Lands	scap	e / Recr	eation	□ Pu	blic Sup	ply
		SEC	TION IV -	- PARCEL/S	ITE II	NFORM	ATION			
								1		
	Parcel/Site Name (each non-contiguous parcel or field)			Acres Owned/ Leased	Тс	Sectior ownship, (S_/T_	Range	County Parcel Identification Number (or attach digital GIS Shape file)		
	TOTAL									
		SEC	CTION V -	- WATER US	SE IN	FORM <i>F</i>	ATION			
1. CROPS (in list the crop	cludes annu s with the h				y and	l sod. If	crop type	s are	rotated a	nnually,
Crop Name	Plant/Crop	э Туре	Earliest Planting Month	Total # Planting Months	ting # Irriga		firrigated Soil Acreage Type <sup>1</sup>		ainfall ation ame <sup>2</sup>	Irrigation System <sup>3</sup>
·	<ul> <li>refer to Blaney Net Depth of Application Area Maps located @ www.sfwmd.gov.</li> <li>3 Drip, Micro jet, overhead, nursery container, etc.</li> <li>IRRIGATED LANDSCAPE / GOLF COURSE AREAS</li> </ul>									
Woter Hee	T. m o 1	#	Acres	Soil Tur	2	Rai	nfall Statio	on .	l wwi ex ex	tion Custom <sup>4</sup>

Water Use Type <sup>1</sup>	# Acres Irrigated	Soil Type <sup>2</sup>	Rainfall Station Name <sup>3</sup>	Irrigation System <sup>4</sup>

<sup>&</sup>lt;sup>1</sup>Turf, shrubs, non-turf planting beds, common areas, cemetery, athletic fields, tennis courts, parks, medians, golf course, etc.

<sup>2</sup>/<sup>3</sup> Refer to Blaney Net Depth of Application Area Maps located @ <a href="www.sfwmd.gov">www.sfwmd.gov</a> (Topics>>Permits >> CONSUMPTIVE WATER USE PERMITS>>[left-hand side of the page under Related Links)

<sup>4</sup> Drip, Micro jet, overhead, etc.

# 3. LIVESTOCK

Livestock Type	# of Livestock	Demand Per Head (Gallons)	Livestock Type	# of Livestock	Demand Per Head (Gallons)
Beef Cattle		12	Horses		12
Chickens		0.1	Sheep		2
Dairy Cattle		150	Turkeys		1
Hogs		2	Other		

# 4. PUBLIC SUPPLY

Water Use Type <sup>1</sup>	Population Served	Per Capita Use (GPD²/Per Person)	Average Daily Use in GPD <sup>2</sup> (Population served x Per Capita Use)	Max Month Peaking Factor (Generally between 1.3 and 1.7)	Max Monthly Use in GPM <sup>3</sup> (Average Daily Use x Max Month Peaking Factor x 30.4)

Indicate what the water will be used for (i.e. employee usage, campground facilities, restrooms, motel, etc.)

Display data in Gallons per day

Display data in Gallons per month

5. OTHER WATER USE (Please provide a description on how the water will be used)					
SECTION V – SOURCES OF WATER					

# **SUMMARY OF GROUNDWATER (WELL) FACILITIES**

Well Name or Number	Pump or Flow Capacity (GPM) <sup>1</sup>	Pump Type <sup>2</sup>	Casing Diameter <sup>3</sup> (inches)	Total Depth <sup>4</sup> (feet)	Casing Depth <sup>5</sup> (feet)	Status <sup>6</sup> (include date if proposed)

<sup>&</sup>lt;sup>1</sup>The amount of water the pump can produce in gallons per minute (GPM)
<sup>2</sup> The type of pump installed for the well (i.e. Centrifugal, Submersible, Electric turbine, Diesel turbine, Jet, Hydraulic Page 4 of 6

<sup>3</sup> The outside diameter of the well casing

# SUMMARY OF SURFACE WATER (PUMP / CULVERT) FACILITES

Pump/Culvert Name or Number	Pump Capacity <sup>1</sup> (GPM)	Pump Intake Diameter / Culvert Diameter <sup>2</sup> (inches)	Pump/Culvert Type <sup>3</sup>	Status <sup>4</sup> (include date if proposed)

<sup>&</sup>lt;sup>1</sup>The amount of water the pump can produce in gallons per minute (GPM).

#### SECTION VI - APPLICANT CHECKLIST

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☐ Proof of Property Control (i.e	e. Deed, Lease) as per t	the Applicant's F	Handbook, su	ubsection 2.1.1	(may be
obtained via the applicable co	ounty Property Apprais	er's website). L	Lessee must	provide date	of lease
expiration and if automatically r	enewable as requested	in Section I.			

- ☐ Location/Site Map (to include the location of all existing facilities)
- ☐ Application Fee of \$350.00 if submitted using this form, or \$100.00 if submitted online @ www.sfwmd.gov/ePermitting.

### SECTION VII- APPLICANT CERTIFICATION

I hereby certify that the surface water pumps or groundwater wells associated with the water use of this project are located on property I own/lease or that I have the legal right to access, use, and maintain the surface water pumps and groundwater wells. Upon the District's request, I shall provide written documentation demonstrating my legal control of the withdrawal facilities at any time during the application process or the permitted duration.

I certify that to the best of my knowledge and belief that all of the information on this form is correct. I understand that any permit issued shall be subject to review and modification, enforcement action, or revocation, in whole or in part, for any material false statement in an application to continue, initiate, or modify a use, or for any material false statement in any report or statement of fact required of the permittee [Section 373.243(1), Florida Statutes]. With advance notice, I agree to provide District staff with proper identification entry to the project site for the purpose of performing analyses of the site for determining whether the conditions for issuance will be met. Further, if a permit is granted, I agree that, with advance notice, District staff with proper identification shall have permission to enter, inspect, observe, collect samples, and take measurements of permitted facilities to determine compliance with the permit conditions and permitted plans and specifications.

(If applicable) I authorize	 to act as	my	agent fo	or p	ermit
application coordination.					

<sup>&</sup>lt;sup>4</sup> The total length in feet between the land surface and the bottom of the well

<sup>&</sup>lt;sup>5</sup> The length in feet from the land surface to the bottom of the well casing

<sup>&</sup>lt;sup>6</sup> Primary, Secondary, Standby, Monitor

<sup>&</sup>lt;sup>2</sup> Size of the intake opening of the pump, in inches or if the culvert is round, the inside diameter of the culvert in inches.

<sup>&</sup>lt;sup>3</sup> The type of pump installed for the well (i.e. Centrifugal, Submersible, Electric turbine, Diesel turbine, Jet, Hydraulic.

<sup>&</sup>lt;sup>4</sup> Primary, Secondary, Standby, Monitor.

APPLICANT'S NAME	APPLICANT'S SIGNATURE	DATE
AUTHORIZED AGENT'S NAME	AUTHORIZED AGENT'S SIGNATURE	DATE