



CONSUMPTIVE USE PERMIT APPLICATION



St. Johns River Water Management District

4049 Reid Street • P.O. Box 1429 • Palatka, FL 32178-1429 • (386) 329-4500

Application forms may also be submitted electronically at www.sjrwm.com.

SECTION I – CONTACT INFORMATION

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: _____

Do you want all correspondence to be transmitted electronically to this email address? Yes No

Applicant is: Owner Lessee* Other (explain) _____

*Attach copy of current lease, or written authorization from property owner

2. **OWNER** (If different than applicant)

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____

3. **AGENT OR CONSULTANT** Address all correspondence to the person below? Yes No

NAME: _____

COMPANY NAME (if applicable): _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____

4. **COMPLIANCE CONTACT** (Person responsible for ensuring that the permit conditions are met)

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: (_____) _____ CELL PHONE: (_____) _____

EMAIL ADDRESS: _____

SECTION II – APPLICATION INFORMATION

For permit application guidance, please refer to the Applicant's Handbook, Consumptive Uses of Water, which is incorporated by reference in Rule 40C-2.101(1)(a), F.A.C. (A.H.). Please complete all fields. Enter N/A for any fields that are not applicable.

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. **CONSUMPTIVE USE PERMIT NO.** (if application is for renewal or modification): _____

3. **REQUESTED PERMIT DURATION:** 20 years _____ years (up to 20 years)
 This project qualifies for a duration greater than 20 years, per Section 373.236, F.S.

4. **PROJECT NAME:** _____ **COUNTY:** _____
 PHYSICAL ADDRESS: _____

5. **RELATED PERMITS** (for projects other than Public Supply)
 - ENVIRONMENTAL RESOURCE PERMIT: MSSW/ERP No(s): _____
 - INDUSTRIAL WASTEWATER (IWW) PERMIT: IWW Permit No(s): _____
 - NATIONAL POLLUTION DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT:
 NPDES Permit No(s): _____

SECTION III – USE TYPE CATEGORIES

Please check all applicable use categories associated with this application and complete the associated supplemental form(s) indicated. The **Minor Individual Supplemental Form** (Form No. 40C-2.900(2)) can be completed in lieu of Supplemental Forms A through G if all of the following criteria are met:

- Use is less than 100,000 gallons per day
- Withdrawal facilities (wells or pump intakes) are less than 8-inches diameter
- Combined withdrawal capacity is less than 1,000,000 gallons per day
- Use is not for Mining/Dewatering
- Use is for Public Supply where end users are not individually metered

Use Type Category	Supplemental Form
<input type="checkbox"/> Agricultural (e.g., crops, livestock, nursery, aquaculture, pasture)	Form A Form No. 40C-2.900(1)(a)
<input type="checkbox"/> Commercial / Industrial (e.g., service business, food and beverage production, cooling and heating, commercial attraction, manufacturing, chemical processing, power generation)	Form B Form No. 40C-2.900(1)(b)
<input type="checkbox"/> Landscape / Recreation (e.g., irrigation of parks, cemeteries, landscaped areas, golf courses, athletic fields, playgrounds)	Form C Form No. 40C-2.900(1)(c)
<input type="checkbox"/> Mining / Dewatering (e.g., water use or removal associated with construction or excavation)	Form D Form No. 40C-2.900(1)(d)
<input type="checkbox"/> Public Supply (e.g., public or privately owned potable water supply utility)	Form E Form No. 40C-2.900(1)(e)
<input type="checkbox"/> Environmental / Other (e.g., aquifer remediation, environmental enhancement, or the use of water for other purposes)	Form F Form No. 40C-2.900(1)(f)
<input type="checkbox"/> Institutional (e.g., hospital, university, military base, correctional facility)	Form G Form No. 40C-2.900(1)(g)

SUMMARY OF SURFACE WATER (PUMP) FACILITIES

Site Name ¹	District ID (if available)	Owner's Pump Name	Pump Capacity (gpm)	Pump Intake Diameter (inches)	Pump Type ²	Name of Surface Water Body	Type of Surface Water Body ³	Status ⁴ (include date if proposed)	Type of Water Use Accounting Method ⁵	Last Meter Check / Method Validation ⁶	Type of Water Use (refer to Section III)

- 1 If project consists of separate or non-contiguous pieces of property or wellfields
- 2 Centrifugal (impeller located above water level), submersible (pump set below water level), turbine (motor at ground surface that drives an impeller below water level), hydraulic dredge pump (typically used for mining), hydraulic dewatering pump (typically used for construction or mining), other (any pump that does not fall into one of the categories previously listed)
- 3 Ditch/canal, lake/pond (natural), lake/pond (artificial), river/creek, spring, mining/borrow pit
- 4 Active (currently in use), Inactive (does not have power, or the connection to the water supply system has been severed), Proposed
- 5 Flow Meter, Time Clock / Pump Run Time, Hour Meter, Digital Electric Meter, Analog Electric Meter
- 6 Enter the date of the last flow meter accuracy check or alternative method validation

SUMMARY OF CONNECTION POINT FACILITIES

Connection points include locations where potable or non-potable water (including reclaimed water) purchased from a water supplier enters a project site.

Site Name ¹	District ID (if available)	Owner's Connection Point Name	Water Supplier Name ²	Type of Surface Water Body ³ (if applicable)	Status ⁴ (include date if proposed)	Type of Water Use Accounting Method ⁵	Last Meter Check / Method Validation ⁶	Type of Water Use (refer to Section III)

- 1 If project consists of separate or non-contiguous pieces of property or wellfields
- 2 Name of water supplier that provides water to the project through the connection point
- 3 Reclaimed water holding pond, stormwater management system
- 4 Active (currently in use), Inactive (the connection to the water supply system has been severed), Proposed
- 5 Flow Meter, Time Clock / Pump Run Time, Hour Meter, Digital Electric Meter, Analog Electric Meter
- 6 Enter the date of the last flow meter accuracy check or alternative method validation

**SECTION V –
USE OF LOWEST QUALITY WATER AND EVALUATION OF RECLAIMED WATER FEASIBILITY**

The applicant may be required to evaluate the feasibility of utilizing reclaimed water and/or other lower quality water sources. The feasibility analysis must be completed as outlined in Section 2.3.3(e), A.H.

SECTION VI – SUMMARY OF REQUESTED WATER USE

Summarize the requested water use from each supplemental form (Agricultural, Public Supply, Commercial / Industrial, etc.) in the table below. Provide projections for each source, at five-year intervals, for the requested permit duration. If the requested permit duration exceeds 20 years, please attach a supplemental sheet providing additional five-year projections for each source.

Year	Requested Amounts and Source(s) of Water				
	Source 1 Name ¹ <hr/> (mgy ²)	Source 2 Name <hr/> (mgy)	Source 3 Name <hr/> (mgy)	Source 4 Name <hr/> (mgy)	Total Requested Water Use (mgy)
Year 20_____					
Year 20_____					
Year 20_____					
Year 20_____					

¹ Provide the name of the water source. Examples include upper Floridan aquifer, stormwater pond, surficial aquifer, Davis Lake.
² Million gallons per year

SECTION VII – AQUIFER STORAGE AND RECOVERY *(complete if applicable)*

ASR Facility Name	Source of Stored Water ¹	Storage Aquifer Name	Recovery Water Destination	Projected Demand Average (mgy)	Projected Demand Maximum (mgy)	Projected Injected Average (mgy)	Projected Injected Maximum (mgy)

¹ Aquifer name, surface water body, water treatment plant name.

Please describe any projected increases or decreases (from historical average) in the amounts stored or recovered.

SECTION VIII – IMPACT EVALUATION

When determining whether the permit applicant has provided reasonable assurances that the conditions for issuance in Rule 40C-2.301, F.A.C., are met, the District will consider the projected impacts of the proposed consumptive use on an individual and cumulative basis. In order to provide reasonable assurance, studies and/or impact evaluations may be required. Please refer to the Applicant's Handbook for guidance regarding the impact evaluations and attach analyses, if applicable.

SECTION IX – APPLICANT CERTIFICATION

I certify that to the best of my knowledge and belief, all of the information provided on this form and in any attachment to it is correct. I also certify that I have legal authority to execute this application for the applicant and certify that the applicant will have sufficient legal authority to undertake the activities described herein. I understand that any material false statement in an application to continue, initiate, or modify a use, or any material false statement in any report or statement of fact required of the permittee, may result in revocation, in whole or in part, of the permit (Section 373.243(1), F.S.). With advance notice, I agree to provide St. Johns River Water Management 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, 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 for permit application coordination.

_____ APPLICANT'S NAME <i>(print or type)</i>	_____ APPLICANT'S SIGNATURE	_____ DATE
_____ AUTHORIZED AGENT'S NAME <i>(print or type)</i>	_____ AUTHORIZED AGENT'S SIGNATURE	_____ DATE

When an application that will be considered by the District's Governing Board is complete, the applicant will be notified of the date of the hearing (Governing Board meeting) at which the application will be considered at least 14 days in advance. The Governing Board normally meets on the second Tuesday of the month.

SECTION X – APPLICANT CHECKLIST

The following items must be included with the permit application submittal:

- Proof of Property Control (e.g., deed, lease), if not already on file with the District
- Application Fee (refer to online fee schedule or Applicant's Handbook)
- Location/Site Map
- Supplemental Form(s) and associated supporting information (e.g., maps, calculations)
- Water Conservation Plan