

St. Johns River Water Management District
ANNUAL STATUS REPORT FOR
SURFACE WATER MANAGEMENT SYSTEMS CONSTRUCTION
(Required whenever construction duration exceeds one (1) year)

St. Johns River Water Management District
P.O. Box 1429
Palatka, FL 32178-1429

PERMIT NO. _____

PROJECT NAME: _____ PHASE: _____

<u>Control Structure(s)</u>	<u>% of Completion</u>	<u>Anticipated Date of Completion</u>	<u>Date of Completion</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Benchmark Description (one per major control structure) _____

	<u>Surface Water Mgt. Works</u>	<u>% of Completion</u>	<u>Anticipated Date of Completion</u>	<u>Date of Completion</u>
Lake(s)	_____	_____	_____	_____
Ditch(es)/Swale(s)	_____	_____	_____	_____
Exfiltr. Trench	_____	_____	_____	_____
Dry Area(s)	_____	_____	_____	_____
Berm(s)	_____	_____	_____	_____

Print Name Phone

Permittee's or Authorized Title and Company Date
Agent's Signature

Address