



Notice of Intent to Use a Generic Permit for Domestic Wastewater Facilities Under Rules 62-621.500(2)(a) or (b), F.A.C.

SECTION 1. GENERAL

1. Permit Application Type

Permit Application Type (mark one only)	Application Fee	“X”
Slow-Rate/Restricted Access Land Application Systems with permitted capacities of 10,000 gallons per day up to 100,000 gallons per day.	\$1000	<input type="checkbox"/>
Rapid-Rate Infiltration Basin and Absorption Field Systems with permitted capacities of 10,000 gallons per day up to 100,000 gallons per day.	\$1000	<input type="checkbox"/>
Slow-Rate/Restricted Access Land Application Systems with permitted capacities less than 10,000 gallons per day.	\$600	<input type="checkbox"/>
Rapid-Rate Infiltration Basin and Absorption Field Systems with permitted capacities less than 10,000 gallons per day.	\$600	<input type="checkbox"/>

2. Instructions

- a. Two copies of this completed form and supporting documentation shall be submitted to the appropriate DEP district office or delegated local program along with the appropriate fee. Checks should be made payable to the Florida Department of Environmental Protection, or the name of the appropriate delegated local program.
- b. All information shall be typed or printed in ink. Where attached sheets (or other technical documentation) are utilized in lieu of the blank spaces provided, indicate appropriate cross-references on the form. If an item is not applicable to your project, indicate “NA” in the appropriate space provided.
- c. Facilities which are not eligible for or do not choose to use this generic permit shall apply for an individual wastewater permit on the appropriate form listed in Rule 62-620.910, F.A.C., including submittal of the appropriate processing fee set forth in Rule 62-4.050, F.A.C.

SECTION 2. ELIGIBILITY

If the answer to any of the following questions is “Yes”, this facility is not eligible for this generic permit.

1. Is this a new facility? Yes No
2. Does this Notice of Intent include a substantial permit revision? Yes No
3. Is this facility subject to pretreatment program requirements? Yes No
4. Is this facility operating under a permit with an associated administrative order or consent order? Yes No
5. Does this facility have an enforcement action pending against it by the Department? Yes No
6. Has this facility failed to meet Capacity Analysis Report requirements? Yes No

7. Is this facility required to provide high-level disinfection? Yes No
8. Does this facility manage its biosolids, also known as domestic wastewater residuals, in a manner other than listed below:
 - transporting biosolids to a Biosolids Management Facility (BMF) or to another facility for treatment or disposal; or
 - landfilling biosolids? Yes No
9. Does this facility accept biosolids or septage from another facility? Yes No
10. Does this facility have a permitted capacity greater than or equal to 100,000 gallons per day? Yes No
11. Does this facility discharge to a system other than listed below:
 - Part II Slow-Rate/Restricted Access Land Application System; or
 - Part IV Rapid-Rate Infiltration Basin or Absorption Field System meeting the requirements of Chapter 62-610, F.A.C.? Yes No
12. Does this facility discharge to more than one type of land application system? Yes No
13. If this facility discharges to a Part II Slow-Rate/Restricted Access Land Application System, does the facility fail to meet the storage requirements of Rule 62-610.414, F.A.C.? Yes No
14. Does this facility include a rapid-rate land application system permitted as a new, modified, or expanded system after April 5, 1989 under Part IV of Chapter 62-610, F.A.C., and which is required to meet the additional preapplication treatment requirements in Rule 62-610.525, F.A.C.? Yes No

SECTION 3. APPLICANT AND TREATMENT FACILITY INFORMATION

1. Treatment Facility Information

a. Facility Name _____

b. DEP Facility Identification Number FLA _____

c. Facility Location

Number and Street _____

City/State/Zip and Postal Code _____

Latitude _____ ° _____ ' _____ " N

Longitude _____ ° _____ ' _____ " W

Where Coordinates Determined _____ (e.g., front gate, well, outfall, etc.)

Date Coordinates Determined _____

Method Used to Obtain Coordinates _____ (e.g., GPS unit, map interpolation, etc.)

d. Contact

Name _____

Title _____

Number and Street _____

City/State/Zip and Postal Code _____

Telephone _____

Email _____

Fax _____

e. Ownership Type

Private

County

State

City

Other: _____

2. Flow

a. Current Design Capacity _____ mgd

b. Basis of Design Capacity Annual Average Daily Flow
 Maximum Monthly Average Daily Flow
 Three-Month Average Daily Flow

c. Current Permitted Capacity _____ mgd

d. Basis of Permitted Capacity Annual Average Daily Flow
 Maximum Monthly Average Daily Flow
 Three-Month Average Daily Flow

e. Enter the average daily flow rate (e.g. annual average, maximum monthly, or three month average daily flow depending on the basis of the permitted capacity) and the maximum daily flow rate, in million gallons per day, that your facility received this year and each of the past two years. Each year's data must be based on a 12-month time period, with the 12th month of "this year" occurring no more than three months prior to this application submittal.

	Two Years Ago	Last Year	Current Year	
Average Daily Flow Rate				mgd
Maximum Daily Flow Rate				mgd

SECTION 4. REUSE AND LAND APPLICATION SYSTEM

1. Reuse or Land Application System Location

County	
City or Town (if applicable)	
Street or Description	
Latitude	° ' " N
Longitude	° ' " W
Where Coordinates Determined	(e.g., front gate, well, outfall, etc.)
Date Coordinates Determined	
Method Used to Obtain Coordinates	(e.g., GPS unit, map interpolation, etc.)

2. Reuse Methods and Capacities

Method of Reuse ¹	Current Design Capacity (mgd)	Basis of Design Capacity ²
Slow-rate/restricted access land application systems (Chapter 62-610, F.A.C., Part II)		
Rapid-rate infiltration basin systems (Chapter 62-610, F.A.C., Part IV)		
Absorption field systems (Chapter 62-610, F.A.C., Part IV)		

1. Facilities that discharge through both a Part II system and a Part IV system do not qualify for use of this generic permit.
2. (e.g., annual average daily flow, maximum monthly average daily flow, three-month average daily flow)

3. Application Areas and Rates

For each reuse or land application site used by the treatment facility, provide the wetted area, and the permitted capacity of the site.

Site	Wetted Area (acres)	Permitted Capacity (mgd)
Total		

4. Storage

What is the total capacity (volume) of system storage facilities? _____ million gallons

SECTION 5. BIOSOLIDS MANAGMENT

1. Method of Biosolids Management

For each method of management, enter the number of sites or number of receiving facilities and the average amount of biosolids used or disposed of per year.

Method	Number of Sites or Number of Receiving Facilities	Dry Tons Used or Disposed per Year
Landfill Disposal		
Transport to Another Facility for Treatment or Disposal		
Total		

2. Transport of Biosolids

If biosolids are transported to another facility for treatment or disposal or to a landfill, provide:

Receiving Facility Name/Landfill Name	
DEP Facility Identification Number	
Number and Street	
City/State/Zip and Postal Code	
County	
Telephone	

SECTION 6. IMPROVEMENT ACTIONS AND SCHEDULED COMPLETION DATES

The following improvement actions are scheduled in accordance with the Operation and Maintenance Performance Report:

Improvement Action	Scheduled Completion Date

SECTION 7. DOCUMENTATION SUBMITTED

Items 1 and 2 shall be submitted with this Notice. Items 3 through 5 shall be submitted when required by Department rules.

	Attached	
	Yes	No
1. Process Flow Diagram , including flow monitoring and influent and effluent sampling locations.	<input type="checkbox"/>	<input type="checkbox"/>
2. Operation and Maintenance Performance Report , prepared in accordance with Rule 62-600.735, F.A.C.	<input type="checkbox"/>	<input type="checkbox"/>
3. Updated Capacity Analysis Report , if required by Rule 62-621.500(2)(a) or (b), Part V.B.2., of the Generic Permit for Slow-Rate/Restricted Access Land Application Systems or Rapid-Rate Infiltration Basin and Absorption Field Systems.	<input type="checkbox"/>	<input type="checkbox"/>
4. Description of Proposed Minor Modification , including any reports, plans, and specifications which have been developed to implement the modification, if this request for use of the generic permit includes a minor modification to the facility as defined in Rule 62-620.200(24), F.A.C.	<input type="checkbox"/>	<input type="checkbox"/>
5. Biosolids Management Facility (BMF) Agreement , which addresses the transfer of biosolids from a source facility to an BMF in accordance with Rule 62-640.880(1)(c), F.A.C.	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 8. CERTIFICATIONS

1. Certifications for Permit Renewals

a. Applicant

I certify that the statements made in this notice of intent and all attachments are true, correct and complete to the best of my knowledge and belief. I agree to operate and maintain these wastewater facilities in such a manner as to comply with the provisions of Chapter 403, F.S., Chapter 62-600, F.A.C., and all other applicable rules of the Department. Further, an appropriate operation and maintenance manual which has been examined by a professional engineer as certified below is available and located at

_____ And can be submitted upon request as part of the permit procedure. A copy of the record drawings or other plans (as applicable) showing modifications to existing facilities, as referenced in Rule 62-600.717, F.A.C., is available at the same location. I also understand that a permit if granted by the Department, is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C., and I will notify the Department in accordance with this rule upon sale or legal transfer of the permitted facilities. In the event of abandonment or inactivation of the facilities, I will notify the Department and ensure that public health and safety are protected as required by Rule 62-620.610, F.A.C.

Signed _____ Date _____
 Name _____ Title _____
 Company Name _____
 Address _____
 City _____ State _____ Zip _____
 Telephone _____ Fax _____ Email _____

b. Professional Engineer Registered in Florida

I certify that the engineering features of these domestic wastewater facilities have been examined by me and found to conform to engineering principles applicable to such projects. I certify that the operation and maintenance manual for these wastewater facilities has been prepared or examined by me or by individual(s) under my direct supervision and that there is reasonable assurance, in my professional judgement, that the facilities, when properly operated and maintained in accordance with this manual, will comply with all applicable statutes of the State of Florida and rules of the Department.

((Affix Seal))

Signed _____
Date _____

Name _____ Florida Registration No. _____
Company Name _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

2. Certifications for Construction of Minor Modifications to Existing Facilities

a. Applicant

I certify that the statements made in this notice of intent and all attachments are true, correct, and complete to the best of my knowledge and belief. I agree to retain the design engineer, or another professional engineer registered in Florida, to conduct on-site observation of construction, to prepare a notification of completion of construction, and to review record drawings for adequacy as referenced in Rule 62-620.630, F.A.C. Further, I agree to provide an appropriate operation and maintenance manual for the facilities pursuant to Rule 62-620.630, F.A.C., and to retain a professional engineer registered in Florida to examine (or to prepare or revise, if necessary) the manual. For projects regulated by Chapter 62-610, F.A.C., I agree to provide the additional operation requirements of that Chapter.

Signed _____ Date _____
Name _____ Title _____
Company Name _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

b. Professional Engineer Registered in Florida

I certify that the engineering features of this domestic wastewater project have been (designed) (examined) by me and found to conform to engineering principles applicable to such projects. In my professional judgment, this facility, when properly constructed, operated, and maintained, will comply with all applicable statutes of the State of Florida and rules of the Department.

((Affix Seal))

Signed _____
Date _____

Name _____ Florida Registration No. _____
Company Name _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____

c. Professional Engineer Registered in Florida

I certify that this firm or individual has been retained by the applicant to prepare a notification of completion of construction, to prepare or revise, if necessary, operation and maintenance manuals, and to review record drawings for adequacy as referenced in Rules 62-620.630, 62-600.717, and 62-600.720, F.A.C.

((Affix Seal))

Signed _____
Date _____

Name _____ Florida Registration No. _____
Company Name _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Fax _____ Email _____