# No-Fee Noticed General Consumptive Use Permit Application for Single Residential Irrigation

**Instructions**: This form is to be used for water use from a private residential irrigation well(s) in the Floridan Aquifer where the residence is otherwise supplied by Public Supply (i.e., a utility). By completing this form, the homeowner understands that it is requesting a No-Fee Noticed General Consumptive Use Permit for water withdrawals in accordance with Rule 62-42.300(5), F.A.C. Nothing in this authorization constitutes an authorization to construct a water well.

To qualify for a No-Fee Noticed General Consumptive Use Permit, the applicant must complete all of the following fields and meet the identified criteria. If your project does not satisfy all of these requirements, you do not qualify for a No-Fee Noticed General Consumptive Use Permit and will need to apply for an Individual Permit. This form must be submitted within 30 days of the construction of the private irrigation well and upon renewal.

## Homeowner Information

|  |  |
| --- | --- |
| Homeowner Name: |  |
| Homeowner Email: |  |
| Homeowner Phone: |  |
| Physical Address where the well will be installed:[address, city, state, zip] |  |

## Public Supply Information

Name of Public Supply (utility providing drinking water to residence):

|  |
| --- |
|  |

**If the home is not provided drinking water by a utility, you may stop. You do not have to complete this form.**

Does this residence have reclaimed water at or adjacent to the property boundary that is available for use from a reclaimed water provider?

|  |  |
| --- | --- |
| [ ]  Yes | [ ]  No |

**If yes, stop, you do not qualify for this No-Fee Noticed General Consumptive Use Permit.**

## System Information

Is the well serving only one residence?

|  |  |
| --- | --- |
| [ ]  Yes | [ ]  No |

**If no, stop, you do not qualify for this No-Fee Noticed General Consumptive Use Permit.**

Estimated acres of parcel(s) this well will serve:

|  |
| --- |
|  |

Does this parcel(s) currently have an irrigation system installed?

|  |  |
| --- | --- |
| [ ]  Yes | [ ]  No |

Does or will the irrigation system cover the entire landscaped area (including all turf grass) of the parcel?

|  |  |
| --- | --- |
| [ ]  Yes | [ ]  No |

If no, approximately what percentage of the parcel(s) is covered by the irrigation system?

|  |
| --- |
|  |

## Water Conservation Requirements

The homeowner must install water conservation devices associated with its irrigation system. Please identify which water conservation device has been installed on the irrigation system. **If a homeowner has not installed one of the water conservation devices, they may not seek authorization under this No-Fee Noticed General Consumptive Use Permit.**

Leak and Water Conservation Devices:

|  |  |
| --- | --- |
| Select which leak detection device has been installed or will be installed with the well installation. At least one must be selected. | [ ]  Variable Frequency Drive[ ]  Flow Meter Sensor |
| Select which water conservation device has been installed. At least one must be selected | [ ]  Smart Meter[ ]  Advanced Sprinkler Control Monitor[ ]  Rain Shut Off Device and Soil Moisture Sensor |

The homeowner must agree to all the following restrictions on water use to qualify for this No-Fee Noticed General Consumptive Use Permit. If a homeowner does not agree, they may not seek authorization under this No-Fee Noticed General Consumptive Use Permit. By checking the boxes below, the homeowner is indicating their agreement.

|  |  |
| --- | --- |
| [ ]  | I will not irrigate more than 2 days a week during daylight savings months or 1 days a week during standard time. |
| [ ]  | I will follow all restrictions on the use of a General Permit by Rule for residential landscape irrigation that apply within the district where my well is located (select one):\_\_\_\_Suwannee River Water Management District (in rule 40B-2.041(9)-(10), F.A.C.)\_\_\_\_St. Johns River Water Management District (in rule 40C-2.042(2)(a), F.A.C.) |

## Well Information

The homeowner must provide information about any well installed or planned to be installed in the Floridan Aquifer that will provide water for irrigation. **A homeowner with a well installed in any other aquifer (including the surficial aquifer) does not have to complete this form.**

|  |  |
| --- | --- |
| Well Driller License Number: |  |
| Well Permit Number: |  |

Provide the date of when the Floridan Aquifer well was constructed, or the planned date of construction:

|  |
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**If the well was constructed before the effective date of this rule, you may stop. You do not have to complete this form.**

## Section 8. 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 [See 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.

I acknowledge that failure to abide by the conditions of this permit shall render it subject to revocation. No-Fee Noticed General Consumptive Use Permits in compliance with these terms are automatically authorized to be operated and maintained by the permittee and subsequent owners for the duration of the authorization.

(If applicable) I authorize to act as my agent for permit application coordination.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Applicant’s Name |  | Applicant’s Signature |  | Date |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Authorized Agent’s Name |  | Authorized Agent’s Signature |  | Date |