# JOINT APPLICATION FOR INDIVIDUAL ENVIRONMENTAL RESOURCE PERMIT/ AUTHORIZATION TO USE STATE-OWNED SUBMERGED LANDS/ FEDERAL DREDGE AND FILL PERMIT

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION/ WATER MANAGEMENT DISTRICTS/ U.S. ARMY CORPS OF ENGINEERS

Effective October 1, 2013















# **INSTRUCTIONS FOR USE OF THIS FORM:**

This form is designed to assist you in submitting a complete application. All applications must include Section A-General Information for All Activities. Sections B through H list typical information that is needed based on the proposed activities, and are only required as applicable. Part 1-C of Section A will guide you to the correct sections needed based on your proposed activities. Applicants are advised to consult Chapter 62-330, F.A.C., and the Environmental Resource Permit Applicant's Handbook Volumes I and II for information regarding the ERP permitting process and requirements while preparing their application. Internet addresses for Chapter 62-330, F.A.C. and the Applicant's Handbook, Agency contact information, and additional instructions for this form can be found in Attachment 1.

What Sections of the Application Must I Fill Out?

What ocotion				Secti	on			
Does the project involve	A- General Information	B- Single Family Projects	C- Wetlands and other Surface Waters	D- Structures or Works in Surface Waters	E- Stormwater Management System	F- State-owned Submerged Lands	G- Mitigation Banks	H- Mines
Fill in wetlands or waters for a single family residence?	х	Х						
Docks, shoreline stabilization, seawalls associated with a single family residence?	х	x				X, if applicable		
Wetland impacts (other than associated with an individual residence)?	х		х					
Boating facilities, a marina, jetty, reef, or dredging?	Х		X	Х		X if applicable		
Any work on state owned submerged land?	х		×			×		
Construction of a stormwater management system?	X		X, if applicable		X			
Constructing a mitigation bank?	Х		×		X, if applicable		х	
Creating a mine?	Х		X, if applicable					х

Note- if you are required to provide Section B, then you do not have to provide any other Sections, unless the activities are on state-owned submerged lands. In that case, Section F will also be required.

If you have any questions, or would like assistance completing this form, please contact the staff of the nearest office of either the Florida Department of Environmental Protection (DEP) or a Water Management District (WMD) (see Attachment 2).

# Section A: General Information for All Activities

# PART 1: NAME, APPLICATION TYPE, LOCATION, AND DESCRIPTION OF ACTIVITY

A.		ame of project, including phase if applicable: ity of Clermont Public Works Operations Facility			
B.		s for (check all that apply):			
	X	Construction or operation of <i>new</i> works, activities and/ or a stormwater management system			
		Conceptual Approval of proposed works, activities and/ or a stormwater management system			
		Modification or Alteration of <i>existing</i> works activities and / or a stormwater management system. Provide the existing DEP or WMD permit #, if known: Note: Minor modifications do not require completion of this form, and may instead be requested by letter.			
		Maintenance or repair of works, activities and/ or stormwater management system previously permitted by the DEP or WMD Provide existing permit #, if known:			
		Abandonment or removal of works, activities and/ or stormwater management system Provide existing DEP or WMD permit #, if known:			
		Operation of an existing unpermitted stormwater management system.			
		Construction of additional phases of a permitted work, activity and/ or stormwater management system.			
		Provide the existing DEP or WMD permit #, if known:			
C.	inforn	the type of activities proposed. Check all that apply, and provide the supplemental nation requested in each of the referenced application sections. Please also reference ant's Handbooks I and II for the type of information that may be needed.			
		Activities associated with one single-family residence, duplex, triplex, or quadruplex that do not qualify for an exemption or a General Permit: <i>Provide the information requested in Section B. Do not complete Section C.</i>			
		Activities within wetlands or surface waters, or within 25 feet of a wetland or surface water, (not including the activities associated with an individual residence). Examples include dredging, filling, outfall structures, docks, piers, over-water structures, shoreline stabilization, mitigation, reclamation, restoration/enhancement. Provide the information requested in Section C.			
		Activities within navigable or flowing surface waters such as a multi-slip dock or marina, dry storage facility, dredging, bridge, breakwaters, reefs, or other offshore structures: <i>In addition to Section C, also provide the information requested in Section D.</i>			
		Activities that are (or may be) located within, on or over state-owned submerged lands (See Chapter 18-21, F.A.C. https://www.flrules.org/gateway/ChapterHome.asp?Chapter=18-21): In addition to Section B or C, also provide the information requested in Section F			

	Construction or alteration of a stormwater management system serving residential, commercial, transportation, industrial, agricultural, or other land uses, or a solid waste facility (excluding mines that are regulated by DEP). <i>Provide the information requested in Section E.</i>						
		Creation or modification of Mitigation Bank (refer to Chapter 62-342, F.A.C. https://www.flrules.org/gateway/ChapterHome.asp?Chapter=62-342): <i>Provide the information requested in Section G.</i>					
		Mines (as defined in Section 2.0 of Applicant's Handbook Volume I) that are regulated by the DEP: <i>Provide the information requested in Section H.</i>					
		Other, describe: Please contact the Agency to determine which additional sections of the application are needed. See Attachment 1 for Agency contacts.					
D.	modific	be in general terms the proposed project, system, works, or other activities. For permit cations, please briefly describe the changes requested to the permit: efer to ERP request letter for general project description.					
E.	For ac	tivities in, on, or over wetlands or other surface waters, check the type of federal dredge and fill requested (if known):					
F.		Activity Street/Road Address or other location (if applicable): 12838 Hancock Road Clermont County(ies): Lake Zip: 34711					
		For utility, road, or ditch/canal activities, provide a starting and ending point using street names and thouse numbers or provide length of project in miles along named streets or highways.					
G.	Please relatio a grap	t location map and Section, Township, and Range information (use additional sheets if needed):  e attach a location map showing the location and boundaries of the proposed activity in  on to major intersections or other landmarks. The map should also contain a north arrow and  ohic scale; show Section(s), Township(s), and Range(s); and must be of sufficient detail to  a person unfamiliar with the site to find it.  n(s): Township: Range: Land Grant name, if applicable:					
	Section	n(s): 34 Township: 22 south Range: 26 east n(s): 34 Township: 22 south Range: 26 east					
Н.	locatio	e (DMS) 28 ° 32 '01 " Longitude (DMS) 81 ° 42 '18 " (Taken from central n of the activity). Explain source for obtaining latitude and longitude (i.e. U.S.G.S. Quadrangle Map, online resource): Google Earth					
l.	Tax Pa	arcel Identification Number(s): 34-22-26-0002-000-00101 and 34-22-26-0002-000-01300					
		er may be obtained from property tax bill or from the county property appraiser's office; if on e parcels, provide multiple Tax Parcel Identification Numbers]					
J.	Direction turn so	ons to Site (from major roads; include distances and landmarks as applicable): From State Road 50, uth on Hancock Road. Property is on east side of Hancock Road about 0.85 miles south of SR-50.					
K.		t area or phase area: - acres PROJECT AREA = 28.68 ACRES, DRAINAGE AREA = 37.75 ACRES					

L.	Name of wa Johns La	aterbody(ies) a <b>ke</b>	(if known) in which	activities will occur	or into which	the system will discharge	
The	e following que luding private s	estions (M- ingle-family	O) are not applic residential docks,	able to activities of the piers, seawalls or the piers, seawalls or the piers.	related to a poat ramps.	single-family residence	
M.	Is it part of a larger plan of development or sale? ☐ yes ☒ no						
N.	<ul> <li>Impervious or semi-impervious area excluding wetlands and other surface waters (if applicable):</li> <li>19.29 acres or square feet</li> </ul>						
Ο.	Volume of w	ater the syst	tem is capable of im	pounding (if applicab	le):	21.775 acre-feet.	
	Is this an applic	cation to mode e project, si	dify an existing Enviruch as a project with wide permit numbers	h a Conceptual App	Permit, or to c		
		10000		TEIOAHONIC.	I HOSECI II	AME	
B.	Indicate if the project, system Agency staff the	or activity.	lf so, please provide	<b>ation meeting(s)</b> or the date(s), location	other discuss	cions about the proposed eting, and the name(s) of	
	a teralled	DATE	LOCATION	MEETING ATTEN	IDEES		
	SJRWMD	7/10/2019	SJRWMD Maitland	Carlos Rexach, M	Molly deVivero	Sandra Joiner	
C.	Attach a depic	·					

included in the plans is based on the activities proposed and is further described in Sections B-H. However, supplemental information may be required based on the specific circumstances or location of the proposed works or other activities.

Refer to attached site construction plans.

D. Processing Fee: Please submit the application processing fee along with this application form and supplemental information. Processing fees vary based on the size of the activity, the type of permit applied for, and the reviewing Agency. Please reference Attachment 3 to determine the appropriate fee. Fee to be paid through e-permitting system.

### PART 3: APPLICANT AND ASSOCIATED PARTIES INFORMATION

Instructions: Permits are only issued to entities having sufficient real property interest as described in Section 4.2.3 (d) of Applicant's Handbook Volume I. Please attach evidence of sufficient real property interest over the land upon which the activities subject to the application will be conducted, including mitigation (if applicable). Refer to Section 4.2.3 (d) for acceptable ownership or real property interest documentation. For corporations, list a person who is a registered agent or officer of the corporation who has the legal authority to bind the corporation.

PATAPPEICANT (ENTITY MUST HAVE SUFFIC					
Name: Last: Brunson	First:	Stoney	ATION	Middle:	
Title: Public Works Director		/: City of Cler	mont		
		- Oity of Oici			
Address: 335 Hancock Rd  City: Clermont	State:	FL	···	Zip: 34711	
Home Telephone:	Otate.				
	<del></del>	Fax:	ne: (352) 24	1-01/8	
Cell Phone:		rax:			
E-mail Address: SBrunson@Clermontfl.o	_				
Correspondence will be sent via email. Checi				ail: [_]	
B. LAND OWNER(S) (IF DIFFERENT OR IN A CHECK HERE IF LAND OWNER IS ALS	O A CO-A	PPLICANT	)		
Name: Last: Keating	First: Jo	hn		Middle: K	
Title:	Company	Company: Clermont Commerce Park, LLC			
Address: 250 E Colonial Dr., Suite 300					
City: Orlando	State: F	L	Zip: 32801		
Home Telephone:		Work Telepho	ne:		
Cell Phone:		Fax:			
E-mail Address:					
Correspondence will be sent via email. Check	k here to re	eceive correspo	ndence via US Ma	ail:	
C. OPERATION AND MAINTENANCE ENTITY	7.0000000000000000000000000000000000000		dbook I, Section	12.3)	
Entity Name: Brunson Contact	t: Last: S		First:	Middle:	
Title: Public Works Director	: City of Cle	rmont			
Address: 335 Hancock Rd					
City: Clermont	State: F	State: FL		Zip: 34711	
Home Telephone: Work Telephone: (352) 241-0178					
Cell Phone:	Fax:				
E-mail Address: SBrunson@Clermontfl.org					
Correspondence will be sent via email. Check here to receive correspondence via US Mail:					

## PART 3: APPLICANT AND ASSOCIATED PARTIES INFORMATION

Instructions: Permits are only issued to entities having sufficient real property interest as described in Section 4.2.3 (d) of Applicant's Handbook Volume I. Please attach evidence of sufficient real property interest over the land upon which the activities subject to the application will be conducted, including mitigation (if applicable). Refer to Section 4.2.3 (d) for acceptable ownership or real property interest documentation. For corporations, list a person who is a registered agent or officer of the corporation who has the legal authority to bind the corporation.

A. APPLICANT (ENTITY MUST HAVE SUFFICIENT REAL PROPERTY INTEREST)					
☑ THIS IS A CONTACT PERSON FO	R ADDITIO	ONAL INFORMATION			
Name: Last: Brunson	First:	Stoney	Middle:		
Title: Public Works Director	Compan	y: City of Clermont			
Address: 335 Hancock Rd					
City: Clermont	State:	FL	Zip: 34711		
Home Telephone:		Work Telephone: (35)	2) 241-0178		
Cell Phone:		Fax:			
E-mail Address: SBrunson@Clermontfl.o	rg				
Correspondence will be sent via email. Chec	k here to re	eceive correspondence via	US Mail:		
B. LAND OWNER(S) (IF DIFFERENT OR IN ADDITION TO APPLICANT)  \[ \begin{align*} \text{X} CHECK HERE IF LAND OWNER IS ALSO A CO-APPLICANT \end{align*}					
Name: Last: Keating	First: Jo		Middle: K		
Title: Manager	Title: Manager Company: Clermont Commerce Park, LLC				
Address: 250 É Colonial Dr., Suite 300					
City: Orlando	State: F	_	Zip: 32801		
Home Telephone:		Work Telephone: 407	-425-2907 x 112		
Cell Phone:		Fax:			
IRE & REALIA	E-mail Address: ikke keatlaw.com				
Correspondence will be sent via email. Check		•			
C. OPERATION AND MAINTENANCE ENTITY (see Applicant's Handbook I, Section 12.3)					
	t: Last: S		Middle:		
Title: Public Works Director Company: City of Clermont					
Address: 335 Hancock Rd					
City: Clermont	State: F				
Home Telephone:		Work Telephone: (352)	241-0178		
Cell Phone:		Fax:			
E-mail Address: SBrunson@Clermontfl.org					
Correspondence will be sent via email. Check here to receive correspondence via US Mail:					

D. CO-APPLICANT (IF DIFFERENT OR IN AL	DITIONT	O'APPLICANT AND OWNER)		
Name: Last:	First:		Middle:	
Title:	Compan	y:		
Address:				
City:	State:		Zip:	
Home Telephone:		Work Telephone:		
Cell Phone:		Fax:		
E-mail Address:				
Correspondence will be sent via email. Checi				
Control of the Control of the Asia Control of the C		ITACT PERSON FOR ADDITION		
Name: Last: Carlos	First: M		Middle: Rexach	
Title: Civil Engineer	Company	y: Bentley Architects + Eng	jineers	
Address: 651 W. Warren Ave.				
City: Longwood	State:	FL	Zip: 32750	
Home Telephone:				
Cell Phone:	<u> </u>	Fax:		
E-mail Address: crexach@baeonline.com				
Correspondence will be sent via email. Checi				
ASSESSMENT OF THE PROPERTY OF	187.160	VIV. (ed de la juliona de la j	C. M. SMIT (CONTRACT)	
Name: Last:	First:		Middle:	
	Company:			
Title:	Company	y:		
Title: Address:	Company	y:		
	State:		Zip:	
Address: City: Home Telephone:		Work Telephone:	Zip:	
Address: City:			Zip:	
Address: City: Home Telephone: Cell Phone: E-mail Address:	State:	Work Telephone: Fax:		
Address: City: Home Telephone: Cell Phone: E-mail Address: Correspondence will be sent via email. Check	State:	Work Telephone: Fax:		
Address: City: Home Telephone: Cell Phone: E-mail Address:	State:	Work Telephone: Fax: eceive correspondence via US Ma	ail:	
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Address: City: Home Telephone: Cell Phone: E-mail Address: Correspondence will be sent via email. Check G. AGENT AUTHORIZED TO SECURE PERMI	State:  k here to re	Work Telephone: Fax: eceive correspondence via US Madifferent FROM CONSULTAILINFORMATION	ail:	
Address: City: Home Telephone: Cell Phone: E-mail Address: Correspondence will be sent via email. Check G. AGENT AUTHORIZED TO SECURE PERM THIS IS A CONTACT PERSON FOR AD Name: Last:	State:  k here to re  I (IF I DITIONAL First:	Work Telephone: Fax: eceive correspondence via US Madifferent FROM CONSULTAILINFORMATION	ail:	
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Address: City: Home Telephone: Cell Phone: E-mail Address: Correspondence will be sent via email. Check G. AGENT AUTHORIZED TO SECURE PERM THIS IS A CONTACT PERSON FOR AD Name: Last: Title: Address:	State:  k here to re  fr (IF I DITIONAL First: Company	Work Telephone: Fax: eceive correspondence via US Madifferent FROM CONSULTAILINFORMATION	ail:  NT)  Middle:	
Address: City: Home Telephone: Cell Phone: E-mail Address: Correspondence will be sent via email. Check G. AGENT AUTHORIZED TO SECURE PERMI THIS IS A CONTACT PERSON FOR AD Name: Last: Title: Address: City:	State:  k here to re  T (IF I  DITIONAL  First:  Company	Work Telephone: Fax: eceive correspondence via US Madifferent FROM CONSULTAILINFORMATION y:	ail:  NT)  Middle:	

Correspondence will be sent via		
If necessary, please add addition	nal pages for other contacts an	nd property owners related to this project.
PART 4: SIGNATURES ANI	D AUTHORIZATION TO AC	CCESS PROPERTY
application must be signed by a	person authorized to bind the of the control of Applicant's Handbook Vol	art 4 for each applicant. For corporations, the corporation. A person who has sufficient real lume I) is required in (B) to authorize access to omain.
with the information contained in accurate. I understand this is an understand that this application an not relieve of any obligation for old permit prior to commencement of opermitting agency authorizes trans	this application and represent application and represent application and not a permit, and any permit issued or proprietal btaining any other required fede construction. I agree to operate after of the permit to a different reany false statement or represents	and any proprietary authorizations identified mation filed with this application. I am familiar that such information is true, complete and and that work prior to approval is a violation. I ry authorization issued pursuant thereto, does ral, state, water management district or local and maintain the permitted system unless the sponsible operation and maintenance entity. I ation in this application is a violation of Section
Stoney Brunson	Atan 10 B	9-2-20
Typed/Printed Name of Applicant or Applicant's Authorized Agent	Signature of Applicant or Applicant's Authorized Agent	Date
Public Works Director		
(Corporate Title if applicable)		
ACCESS THE PROPERTY: I certify that:		ST AND AUTHORIZATION FOR STAFF TO
have legal authority to grant perm signature below, for staff of the Age lands and waters of the property as in this application. I authorize the	nd upon which the activities desinission to access those lands. I ency and the U.S. Army Corps of a necessary for the review of the ese agents or personnel to entispection, and/or sampling. Furth	defined in Section 4.2.3 (d) of Applicant's cribed in this application are proposed and I hereby grant permission, evidenced by my Engineers to access, inspect, and sample the proposed works and other activities specified er the property as many times as may be er, I agree to provide entry to the project site fa permit is granted.
OR		
☐ I represent an entity having <i>the</i> make appropriate arrangements to inspect, and sample the property as	enable staff of the Agency and t	nd condemnation authority, and I/we shall the U.S. Army Corps of Engineers to access,
Stoney Brunson	1 Stan B-	1 9-2-20
Typed/Printed Name	Signature S	Date
Public Works Director		
(Corporate Title if applicable)		

Correspondence will be sent via email. Check here to receive correspondence via US Mail:
If necessary, please add additional pages for other contacts and property owners related to this project.
PART 4: SIGNATURES AND AUTHORIZATION TO ACCESS PROPERTY
Instructions: For multiple applicants please provide a separate Part 4 for each applicant. For corporations, the application must be signed by a person authorized to bind the corporation. A person who has sufficient real property interest (see Section 4.2.3 (d) of Applicant's Handbook Volume I) is required in (B) to authorize access to the property, except when the applicant has the power of eminent domain.
A. By signing this application form, I am applying for the permit and any proprietary authorizations identified above, according to the supporting data and other incidental information filed with this application. I am familiar with the information contained in this application and represent that such information is true, complete and accurate. I understand this is an application and not a permit, and that work prior to approval is a violation. I understand that this application and any permit issued or proprietary authorization issued pursuant thereto, does not relieve of any obligation for obtaining any other required federal, state, water management district or local permit prior to commencement of construction. I agree to operate and maintain the permitted system unless the permitting agency authorizes transfer of the permit to a different responsible operation and maintenance entity. I understand that knowingly making any false statement or representation in this application is a violation of Section 373.430, F.S. and 18 U.S.C. Section 1001.
John Kingman Keating 9/1/2020
Typed/Printed Name of Applicant or Applicant or Applicant or Applicant's Authorized Agent Signature of Applicant or Applicant's Date  Authorized Agent
(Corporate Title if applicable)
B. CERTIFICATION OF SUFFICIENT REAL PROPERTY INTEREST AND AUTHORIZATION FOR STAFF TO ACCESS THE PROPERTY: I certify that:
I possess sufficient real property interest in or control, as defined in Section 4.2.3 (d) of Applicant's Handbook Volume I, over the land upon which the activities described in this application are proposed and I have legal authority to grant permission to access those lands. I hereby grant permission, evidenced by my signature below, for staff of the Agency and the U.S. Army Corps of Engineers to access, inspect, and sample the lands and waters of the property as necessary for the review of the proposed works and other activities specified in this application. I authorize these agents or personnel to enter the property as many times as may be necessary to make such review, inspection, and/ or sampling. Further, I agree to provide entry to the project site for such agents or personnel to monitor and inspect permitted work if a permit is granted.
OR
I represent an entity having the power of eminent domain and condemnation authority, and I/we shall make appropriate arrangements to enable staff of the Agency and the U.S. Army Corps of Engineers to access, inspect, and sample the property as described above.
John Kingman Keating 9/1/2820
Typed/Printed Name Signature Date
(Corporate Title if appligable)

C. DESIGNATION OF AUTHORIZED AGENT (IF APPLICABLE):					
processing of this application for request, supplemental informatio bind me, or my corporation, to	the permit and/or proprietary and in support of the application. perform any requirements white understand that knowingly making.	on behalf of my corporation, as the agent in the authorization indicated above; and to furnish, on In addition, I authorize the above-listed agent to ch may be necessary to procure the permit or ing any false statement or representation in this Section 1001.			
Typed/Printed Name of Applicant	Signature of Applicant	Date			
(Corporate Title if applicable)	<del></del>				