19339-2



APPLICATION 1719

	WATER MANAGEMENT DISTR P.O. Box 1429 atka, Florida 32178-1429		016426
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MANAGEMENT AND STORAGE OF SURFACE WATERS INDIVIDUAL APPLICATION ASSIGNMENT SHEET

Reviewer: COOK EUNICE Office: ORLANDO 12/30/93 Date Processed: Date Received: 12/28/93 Application Number: 4-069-0276AM Related Application Number: THE GREATER CONSTRUCTION CORP. Owner: THE GREATER CONSTRUCTION CORP. Applicant: Consultant/Engineer: CONKLIN, PORTER & HOLMES-ENGINEERS, INC. GREATER PINES PHASES 2 & 3 Project Name: THE FOLLOWING INFORMATION IS NEEDED TO ADMINISTRATIVELY COMPLETE THIS **APPLICATION:** Signatures Authorization from Owner for Agent Individual/Firm Preparing Specifications Name in which Permit is to be Issued Entity Responsible for Maintenance StatementPERMIT DATA SERVICES Palatka Bound Reports (No. Received: 3)

_ Plans (No. Received: $\underline{3}$)

_ Calculations (No. Received: $\underline{3}$)

Notice of Receipt of Application

Adequate Map Coordinates

Fee: 2000.00 Receipt Number: 16426

Comments: REC'D NOTICE

Application is adminstratively complete? YES LW

1

Application Number: 4-069-0276A	λM
Project Name: GREATER PINES PHA	ASES 2 & 3
Date Received: 12/28/93	Reviewer: COOK EUNICE
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Request for Additional Information	ion must be mailed by: 1/25/94
Request for Additional information	$\frac{1}{20}$
Deculatory Mosting Date if dote	rmined technically/administratively
Regulatory meeting bate if deter	
complete: <u>3/8/94</u>	
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** <u>NOTE:</u> PLEASE RETURN TO THE DATA MANAGEMENT SUPERVISOR UPON SCHEDULING BOARD ACTION.

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nt	CONKLIN, PORTER & ENGINEERS, IN		LETT 'R OF TRANSMITTAL
	P.O. Box 2808 SANFORD, FLORIDA 322	72-2808	
· **	(407) 322-6841 83 FAX 330-0639		DATE 12/28/93 JOB NO. 66765.04 ATTENTION MS MARGIE COOK, P.E.
то	J.J.R.W.M.	N	RE GRATER PINES 2+3
то			9KCALENG TOUSSIE.S
_	HAND-DOLIN	EREI)	
_			28 1993
			4-069-0276 hm
			RECORDS
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> WE A	ARE SENDING YOU 💢 Attach	ed 🛛 Under separate cover via_	the following items:
	Shop drawings	Prints Plan	· ·
	□ Copy of letter	Change order	S BELOW
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COF	PIES DATE NO.	40C-4 APPLICA	TON - MODIFICATION W.
	1 104/95	AREA INCRE	
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	1 10/21/93 TITST		IPT OF APPLICATION W.
Ť			OC MAP & DEPICTION OF WORKS.
	2 17/02/02 -	-	-
	2 17/1/2 1-131-		C. SUBMITTALS W. ENCLOSURES PLANS PH Z+3, GREATER
	7418193 7 5/13	PINES S/2).
тисс	SE ARE TRANSMITTED as che	ked below:	
INCO	- -	□ Approved as submitted	Resubmitcopies for approval
•	X For approval □ For your use	Approved as submitted Approved as noted	
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	☐ For review and commo		
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	Y TO GREATER - AT	TN SIM BIBLE, F	E. In frank
	1. 1. F	VCLOSURES.	SIGNED: F.C. Dlance
PRODUC		If enclosures are not as noted, ki	ndly notify us at once.

·		G6/ .04	1	
	·		Pines, Phase 2 & 3	
	MANAGEMENT AND STORAGE OF INDIVIDUAL PERMIT APP - CHAPTER 40C-4, CHAPTER	40C-41, F.A.C.	C C C C C C C C C C C C C C C C C C C	
		THE Y- O	9-6276Am	
- TOTAL PIVER W	ATER MANAGMENT DISTRICT	TTE DECEIVED	- TOD - 0000 10	
DEPARTMENT OF RES	OURCE MANAGEMENT	ASSTGNED REVIE	WERS M. Cook / Eurice	ο.
DIVISION OF RECOR	DS	PROJECTED DATE	OFPERA	\sim
$n \cap P \cap Y = 1429$		ISSUANCE	ORLANDO	
PALATKA, FLORIDA	32178-1429		TRANS On the	
		pen. Read ALL inst	ressary data	
Please type of pr back of this shee sheets attached.	int with <u>BLACK</u> ball point et before completing applic	ation. Complete ne		
	OR: ALTERATION REMOVAL ABANDON ALTER IS ALSO CONSIDERED A N	OPERATION MAI MENT X CONSTRUCT S APPLICATION TO OP	NTENANCE ION (APPLICATION ERATE.)	
OWNER	The Greater Construction	n Corp.		
Name of Owner:	P. 0. Box 3873	Caminala		
Address: City:		ty: <u>Seminole</u> 101 Telephone No	: (407) 869-0300	
State:		91 1000		
APPLICANT/ENTIT	Y TO RECEIVE PERMIT Robert A. Mandell, Pr	resident - Greater	Construction Corp.	
Name of Applica	P. O. Box 3873	Caminolo		
Address: City:	Cour	nty: <u>Seminole</u> 701 Telephone No	D.: (407) 869-0300	
State:	FL Zip Code: 32			
		ONSERVATIONIST		
CONSULTANT OR E	Conklin, Porter & Holmes	-Engineers, Inc.		
Name of Firm:	Conklin, Porter a normes ontact: James C. Branch,	P.E.		
Address:P	tord Cou	inty: <u>Seminole</u>	vo.: <u>(407) 322-6841</u>	
City: <u>San</u> State: <u>FL</u>	Zip Code: 37	2772-28081e1epitere		
State:				
ATTORNEY OF, RE	CORD	ton Kantor & Reed		
	Lowndes, prosures, bos	cer, Runos		
Name of Firm L	Ullall. Kion .			
7. America P	0. Box 2809	unty: Orange	No.: (407) 843-4600	
City Orl	andoZip Code:	32802. Telephone	10	
State: FL	E	مەربىيە بىر بارىمەر چېرىمەر بىرىنىيە بىرىنىيە بىلىرىمەر بىلىرىمەر بىرىنىيە بىرىنىيەر بىرىمەر بىرىنىيە بىرىنىيە		
PROJECT INFOR	MATTON	0 4 3		
PROFET DEOR	MATION ct: Greater Pines Phases	2 & 3	000 (
U.S.G.S. Topo	Quad Map:11	85 Total Acre	age Owned: 302.6	
County: Lake	Project Acreage: 11	Bange: 26E	-)	
Section: 28 &	Quad Map: Project Acreage: 11 33 Township: 22S of Project: Phases 2 & 3 (1 development. Phase 1 al	98 & 102 single far	nily lots) of a o-pilese	
Description c	f Project: Phase 1 al	ready permitted an	a constructed.	
residentia	1 UEVCTOPINE			
		Charmutaton	collection and retentio	n
Decemintion (of Proposed Surface Water	WOIKS: Stormwater		
with percolat	tion to groundwater.			
WICH Percord				
	Water Body Most Affected	Lost Lake (offs	ite to west)	
Water Course	Water Body Most Affected ction is Proposed to Common on is for Alteration of E	ence/End: 3/94 -	9/94	
	en is for Alteration of E	xisting Permit,		
If Applicati	011 13 101 1 060 0276			
	Number: 4-009-0270 Cormation Required on Atta	ichea Sheersi		-
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Have any Wetland Resource/Dredge and Fill Permits, Authorizations, or Exemptions Been Granted? N/A If so, Give Nos. and Agencies: N/A

** Issuance of Permit Does Not Preclude Responsibility of Applicant to Obtain All Necessary Federal, State, Local Permits **

In compliance with the provisions of Cnpater 373, Florida Statutes, 1973, and applicable rules and regulations of St. Johns River Water Management District, application is hereby made for a permit as identified above, and in accordance with support data and incidental information filed with this application and made a part thereof.

Robert A. Mandell

Applicant's Signature

If person other than applicant has completed this form, that person certifies by his signature below that he is acting as an authorized agent of the applicant and his signature will be certification that he is in fact the authorized agent.

Agent's Name (please print)

Applicant's Name (please print)

Agent's Signature

1.12

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Date

93

ADMINISTRATIVE APPLICATION PROCESSING SHEET

Application	Numk	ber: <u>4-(</u>)69-0276AM	Reviewe	r(s):	COOK	EUNICE	
Date Receive	ed:	12/28/93	<u>3</u>					
Applicant:	THE	GREATER	CONSTRUCTION	CORP.				

MAPPING INFORMATION:

Date Mapped:	1-10-90	4	UTM: YE	S N	0
Basin: EB	LB	ОВ	UB	WB	WP
map number 95	•	<u> </u>	QUAD ONT-E		
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Comments:	· · ·		· · · · · · · · · · · · · · · · · · ·		
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APPLICATION DATA ENTRY INFORMATION:

FILE	DATE	INITIALS
Main	1-10-93	OST
Address	1-10-93	OSI
Location	1-10-93	OZZ
Mapped	1-26-94	OST
Fee **		

** Fee is entered during the Electronic Assignment Sheet Process.

