19339-3



APPLICATION 1719

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT P.O. Box 1429 Palatka, Florida 32178-1429	0 020911 DATE June 2 1997
RECEIVED FROM the Structure THE SUM OF ALLATUR PLACE, PLANES 5-7 FOR	Dollars \$2000, W
AMOUNT PAID	iiin Oquerdo

MANAGEMENT AND STORAGE OF SURFACE WATERS INDIVIDUAL APPLICATION ASSIGNMENT SHEET

Office: ORLANDO Reviewer: ABOODI EUNICE
Date Received: <u>6/2/97</u> Date Processed: <u>6/3/97</u>
Application Number: 4-069-0276AM2-ERP
Related Application Number: <u>4-069-0276</u>
Owner: GREATER CONSTRUCTION CORP.
Applicant: GREATER CONSTRUCTION CORP.
Consultant/Engineer: <u>CONKLIN, PORTER & HOLMES-ENGINEERS, INC.</u>
Project Name: <u>GREATER PINES, PHASES 5-7</u>
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 Statement
Bound Reports (No. Received: <u>5</u>)
Plans (No. Received: <u>5</u>)
Calculations (No. Received: <u>5</u>)
Notice of Receipt of Application
Adequate Map Coordinates
Fee: <u>2000.00</u> Receipt Number: <u>20911</u> 67
Comments:
Application is adminstratively complete? <u>YES</u> LO
RAI must be mailed by: <u>6/30/97</u> Regulatory Meeting: <u>8/12/97</u>

ENGINER 101 N. Woo Suite 100	N, PORTER & HO ERS, INC. dland Boulevard ORIDA 32720	LMES	3		Date: Job No.:	DF TR/ May 29 G6765	
Phone:	(904) 736-4142				Attention:	Alex Ab	oodi
FAX:	(904) 736-8412			Ĩ	Ren Great	er Pines	
То:	SJRWMD 618 East South Street Orlando, FL 32801					2 1997 276A 5	M2-ERP
WE ARE SEI		Attac	hedUno	der Separate C	ORLĂ Cover Via SJR V	NDO MMD	the Fołlowing Items:
	Shop Drawings		Prints	٦	Plans		Samples
	Specifications		Copy of Letter	٥	Change Order		
-	Other						

Other

COPIES	DATE	NO.	DESCRIPTION	
5 Sets			Signed and Sealed Construction Plans	
1			Original Signed Permit Application	
5 Copies			Permit Application	
1			Check in the amount of \$2000.00 payable to SJRWMD	
5			Signed and Sealed Calculation Packages	
5			Soils Reports (Nodarse & Assoc.)	

Approved as Submitted

Returned for Corrections

Approved as Noted

THESE ARE TRANSMITTED as checked below:

- X For ApprovalD For Your Use
- As Requested
- For Review and Comment
 FOR BIDS DUE
 - FOR BIDS DUE ______19 _____

- Resubmit____ Copies for Approval
- Submit ____Copies for Distribution
 - Return____ Corrected Prints
- Prints Returned After Loan To Us

REMARKS :

Signed: _ Jason R. Kellogg

If enclosures are not as noted, kindly notify us at once.

Copy to:

A:\G6765.07\jrk5-29.lot:ss

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ACOE Application #	FOR A GENCY USE O SIR Applicati	
Date Application Received	Date Application Receiv	/ed
Proposed Project Lat.	'" Fee Received \$	
Proposed Project Long°	'" Fee Receipt #	
	Date Received	Project Use Codes
	Assigned Reviewers	Reviewer#'s

SECTION A

Greater Pines, Phases 5-7

Are any of the activities described in this application proposed to occur in, on, or over wetlands or other surface waters? X no ves Type of Environmental Resource Permit Requested (check at least one) Α. Noticed General - include information requested in Section B. Standard General (Single Family Dwelling) - include information requested in Sections C and D. Standard General (all other projects) - include information requested in Sections C and E. Individual (Single Family Dwelling) - include information requested in Sections C and D. Individual (all other projects) - include information requested in Sections C and E. Conceptual - include information requested in Sections C and E. Mitigation Bank Permit (construction) - include information requested in Sections C and F. (If the proposed mitigation bank involves the construction of a surface water management system requiring another permit defined above, check the appropriate box and submit the information requested by the applicable section.) Mitigation Bank (conceptual) - include information requested in Sections C and F. Standard General Stormwater - include information requested in Sections C and H Individual Stormwater - include information requested in Sections C and H B Type of activity for which you are applying (check at least one) Construction and operation of a new system including dredging or filling in, on or over wetlands and other surface waters. Alteration and operation of an existing system which was not previously permitted by a WMD or DEP. Χ Modification of a system previously permitted by a WMD or DEP. Provide previous permit numbers: 4-069-0276 Alteration and operation of a system Extension of permit duration Construction and operation of additional phases of _ Abandonment of a system _ Removal of a system a system X no Are you requesting authorization to use State Owned Submerged Lands? ves С (If yes, include the information requested in Section G.) D. For activities in, on or over wetlands or other surface waters, checking of federal dredge and fill permit requested: N/A Individual Programmatic General ___ General Nationwide ALM 02 199 Ε. Are you claiming to qualify for an exemption? _____ yes If yes provide rule number if known_____ PDS 3.117 WE.WH Y

FORM NUMBER 40C-4.900(1)Pg 1 of 4

	ENTITY TO RECEIVE PERMIT (IF OTHER THAN OWNER)
N A M E	NAME
Hampton P. Conley	
ADDRESS 1105 Kensington Park Drive	ADDRESS
CITY, STATE, ZIP Altamonte Springs, FL 32714	CITY, STATE, ZIP
COMPANY AND TITLE Greater Construction Corp. / Exec. V.P.	COMPANY AND TITLE
TELEPHONE (407) 869-0300 FAX (407) 862-0057	TELEPHONE () FAX ()
AGENT AUTHORIZED TO SECURE PERMIT (IF AN AGENT IS USED)	CONSULTANT IF DIFFERENT FROM AGENT)
N A M E	N A M E James C. Branch, P.E.
COMPANY AND TITLE	COMPANY AND TITLE Conklin, Porter & Holmes-Engineers, Inc., Sr. Vice President
ADDRESS	A D D R E S S 101 N. Woodland Boulevard, Suite 100
CITY, STATE, ZIP	CITY, STATE, ZIP DeLand, FL 32720
TELEPHONE () FAX ()	TELEPHONE (904) 736-4142 FAX (904) 736-8412
Name of project, including phase if applicable Greater Pir	
Total project area for which a permit is sought Impervious area for which a permit is sought	302.55 ac 74.66 ac ac ac ed projects) of work in, on, or over wetlands or other surface waters? ac et 0 hectares 0 square meters
Project location (use additional sheets, if needed) County(ies) Lake Section(s) 28 Township(s) 222 Section(s) 33 Township(s) 222 Land Grant name, if applicable Tax Parcel Identification Number Street address, road, or other location Hancock Road, S. C City, Zip Code if applicable Unincorporated Lake County	S Range(s) 26E of US 50, S. Lake County

FORM NUMBER 40C-4.900(1)Pg 2 of 4

Describe, in general terms, the proposed project, system or activity.

This proposed project is to consist of the construction of the roadways, stormwater drainage and treatment system, and

utilities for Phases 5-7 of the Greater Pines subdivision. Phases 1-4 have already been completed under previous SJRWMD

Permit.

If there have been any pre-application meetings, including at the project site, with regulatory staff, please list the date(s), location(s), and names of key staff and project representatives. Yes - Meeting @ SJRWMD offices, Orlando, May 1997, with Mr. Alex Aboodi of SJRWMD, Mr. James C. Branch of CPH

Engineers, and Mr. Hamp Conley of Greater Construction.

Date

Please identify by number any MSSW/Wetland Resource/ERP/ACOE permits pending, issued or denied for projects at the location and any related enforcement actions.

Agency

No.\Type of Application

Action Taken(Pending/Issued/Denied)

SJRWMD

1. ____

4-069-0276 Indivd. Permit

Permit Issued, Being Modified

Note: The following information is required for Projects proposed to occur In, on or over wetlands or other surface waters that need a federal dredge and fill permit and/or authorization to use state owned submerged lands. Please provide the names addresses and zip codes of property owners whose property directly adjoins the project (excluding applicant). Please attach a plan view showing the owner's names and adjoining property lines. Attach additional sheets if necessary. N/A

4

FORM NUMBER 40C-4.900(1)Pg 3 of 4

By signing and submitting this application form, I am applying, or I am applying on behalf of the applicant, 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 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 me of any obligation for obtaining any other required federal, state, water management district or local permit prior to commencement of construction. I agree, or I agree on behalf of my corporation, to operate and maintain the permitted system unless the permitting agency authorizes transfer of the permit to a responsible operation 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.

Hampton P. Conley

Typed/or Printed Name of Applicant (If no Agent is used) or Agent (If one is so authorized below)

Signature of Applicant/Agent

(Corporate Title if applicable)

AN AGENT MAY SIGN ABOVE ONLY IF THE APPLICANT COMPLETES THE FOLLOWING:

I hereby designate and authorize the agent listed above to act on my behalf, or on behalf of my corporation, as the agent in the processing of this application for the permit and/or proprietary authorization indicated above; and to furnish, on request, supplemental information in support of the application. In addition, I designate and authorize the above-listed agent to bind me, or my corporation, to perform any requirement which may be necessary to procure the permit or authorization indicated above. 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.

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Signature of Applicant

Date

(Corporate Title if applicable)

<u>Please note: The applicant's original signature (not a copy) Is required above.</u>

PERSON AUTHORIZING ACCESS TO THE PROPERTY MUST COMPLETE THE FOLLOWING:

I either own the property described in this application or I have legal authority to allow access to the property, and I consent, after receiving prior notification, to any site visit on the property by agents or personnel from the Department of Environmental Protection, the Water Management District and the U.S. Army Corps of Engineers necessary for the review and inspection of the proposed project 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 and inspection. Further, I agree to provide entry to the project site for such agents or personnel to monitor permitted work if a permit is granted.

Hampton P. Conley	Hangton P bartan
Typed/Printed Name	Signature
	Date
Executive Vice President	5/20/97

(Corporate Title if applicable) FORM NUMBER 40C-4.900(1)

Pg 4 of 4

Hompton P Kont. 5/22/97 Date

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GIS/ADMINISTRATIVE MS	SW APPLICATION TRACK	CINC SHEET		
	SW THALIGHTION TRACE	(ING DINNI		
Application Number: <u>4-069-0276AM2</u>	-ERP			
Reviewer(s): ABOODI EUNICE				
		, <i>#</i>		
Date Received: <u>6/2/97</u>				
Applicant: GREATER CONSTRUCTION	CORP.	* 		
Project Name: GREATER PINES, PHA	SES 5-7			
***************************************	* * * * * * * * * * * * * * * * * * * *	********	****	
MAPPING INFORMATION:				
Acceptable as Received: YES				
Acceptable as Received. <u>TEB</u>				
Hydrologic Basin: OKLAWAHA BASIN				
MAP NUMBER QUAD				
32 CLERMONT-E	ان			
Date Application Entered: _6/ 9/	<u>97</u>			
Date Application Mapped:6/13/_	97 Initial	s: BB		
* * * * * * * * * * * * * * * * * * * *				
	***********	******	* * * * * * * * * *	
Request for Additional Information	n must be mailed by:	6/30/97		
Regulatory Meeting Date if determ:	ined technically/adm	unistrativel	v	
Complete: <u>8/12/97</u>			2	
INFORMATION PROVIDED BY REVIEWING	STAFF:			
	Date 1st Resp. rece Date 2nd Resp. rece			
	Date 3rd Resp. rece			
	Date 4th Resp. rece		· · · · · · · · · · · · · · · · · · ·	
Date Application Complete:				
Schedule for	Regulatory Meetin	g (Approval/1	Denial)	
************	*****	*****	****	
** NOTE: PLEASE RETURN WITH TH	E TSR FOLDER.			