

# APPLICATION 1719

•	$\frac{12 / 12 / 20}{10}$ 0 021110
OF LEWIS CO	BP & SUBSIDIACIES
address Smerset Es	Hotes Prose II @Kins Ridge
4-069	-19411-10 DOLLARS \$1000!
ACK 00312408	ST. JOHNS RIVER WATER MANAGEMENT DISTRICT
CASH CHECK	P.O. Box 1429 Palatka, Florida 32178-1429
MONEY ORDER DRAFT	$\bigcirc$
FOR	(by fisette coule
803	Thank You

### Fee Receipt

## ST. JOHNS RIVER WATER MANAGEMENT DISTRICT P. O. Box 1429

Palatka, FL 32178-1429

4-069-19-11-10

Date:

Dec. 12, 2000

By:

Lisette M Bonilla

**RECEIVED FROM:** 

Lennar Corp And Subsidiaries

THE SUM OF:

RECEIPT #:

\$1,000.00

11118

FOR:

Application Fee

**FEE DETAIL INFORMATION** 

F/A Receipt

O-021110

\$1,000.00

4-069-18411-10

ORDER Pay MIAMI FL 33172 700 N.W. 107TH AVE THE DO NOT ACCEPT THIS CHECK UNLESS YOU CAN SEE A DUAL-TONE TRUE WATERMARK THAT APPEARS AS A CHAIN LINK PATTERN WHEN HELD TO THE LIGHT. 🖯 ST. JOHNS RIVER WATER MGMT DISTRICT P.O. BOX 1429 PALATKA FL 32178 Chicago, Illinois Payable through FCC Ntnl. Bank Wilmington, Delaware Two Signatures Required on Amounts Over \$50,000.00 11/14/00 \*\*\*\*\*1,000.00 AMOUNT 00312408 Dollars 311

"BO12 1 E 00"

THE FACE OF THIS CHECK HAS A BLUE AND GREEN BACKGROUND - ANY OTHER COLORS MAY BE EVIDENCE OF CHEMICAL ALTERATION OR ERASURE - SEE REVERSE SIDE FOR MORE SAFETY FEATURES. 👸

### SECTION C ENVIRONMENTAL RESOURCE PERMIT NOTICE OF RECEIPT OF APPLICATION

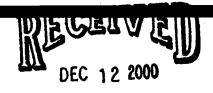
This information is required in addition to that required in other sections of the application. Please submit five copies of this notice of receipt of application and all attachments. Please submit all information on 8 1/2" x 11" paper.

	r: LENNAR		<u>PHASE II AT KIN</u> S. A FLORIDA G	<u>GS RIDGE</u> ENERAL PARTNER	SHIP	County:	<u>LAKE</u>
<b>Applic</b>	ant: SAME A					-	
Applic	ant's Address:	1110 DOUGLAS	S AVENUE; SUIT	E 2040, ALTAMONT	E SPRINGS, FLO	ORIDA 3271	4
1.	project. If not	apparent from the o	quad map, attach	angle map reduced or a location map showi to allow a person unfa	ng a north arrow a	and a graphic	
2.	or would rec	eive discharge (eith	ner directly or indi	ce waters that would l rectly), or would othe er or Aquatic Preserve	rwise be impacte	impounded, d by the prop	diverted, drained, oosed activity, and
3.				clearly shows the wo pe of works. Use mu			to be constructed.
<b>4</b> .	"construct su	rface water manag	ement system to	"construct a deck wit serve 150 acre resid ing storm water po	ential developme	replace two ( nt"):	existing culverts",
<b>5</b> .	Specify the a otherwise im	creage of wetlands pacted by the prope	s or other surface osed activity:	waters, if any, that ar	e proposed to be	disturbed, fil	led, excavated, or
		_					
6.	Provide a bri additional sh <b>N/A</b>	ef statement descri eets if necessary):	ibing any propose	ed mitigation for impac	cts to wetlands ar	nd other surfa	ace waters (attach
6.	additional sh	ef statement descri eets if necessary):			cts to wetlands ar	nd other surfa	ace waters (attach
Appl Appl Offic Date	additional sheN/A	eets if necessary):	FOR AG Iq YII — Ta spected:	SENCY USE ONLY		nd other surfa	ace waters (attach

ORLANDO SJR WMD

Control of the second s	FOR AGENCY USE ONLY Application # 4 - 069 - 19411 - 10  Application Received  Date Application Received  12-13-66
Propos	sed Project Lat.  "Fee Received \$ 1,000
	Assigned Reviewers Reviewert's Dations
	SECTION A
Are a	any of the activities described in this application proposed to occur in, on, or over wetlands or other surface waters? yesX_ no
A.	Type of Environmental Resource Permit Requested (check at least one)
	<ul> <li>Noticed General - include information requested in Section B.</li> <li>Standard General (Single Family Dwelling) - include information requested in Sections C and D.</li> <li>Standard General (all other projects) - include information requested in Sections C and E.</li> <li>Individual (Single Family Dwelling) - include information requested in Sections C and D.</li> </ul>
<u> </u>	<ul> <li>Individual (all other projects) - include information requested in Sections C and E.</li> <li>Conceptual - include information requested in Sections C and E.</li> <li>Mitigation Bank Permit (construction) - include information requested in Sections C and F.</li> <li>( If the proposed mitigation bank involves the construction of a surface water management system requiring</li> </ul>
	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)
<u> </u>	(Construction and operation of a new system including dredging or filling in, on or over wetlands and other surface waters.)
<u> </u>	Alteration and operation of an existing system which was not previously permitted by a WMD or DEP.  Modification of a system previously permitted by a WMD or DEP. Provide previous permit numbers:
	Alteration and operation of a system Extension of permit duration Abandonment of a system X Construction and operation of additional phases of Removal of a system a system
C.	Are you requesting authorization to use State Owned Submerged Lands? yesX_ no (If yes, include the information requested in Section G.)
D.	For activities in, on or over wetlands or other surface waters, check type of federal dredge and fill permit requested:
	Individual Programmatic General Rationwide
E.	Are you claiming to qualify for an exemption? yesX _ no  If yes provide rule number if known

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



PDS ORLANDO SJR WMD

OWNER(S) OF LAND	ENTITY TO RECEIVE PERMIT (IF OTHER THAN OWNER)			
NAME ROBERT AHRENS	NAME Same			
ADDRESS 7600 NOB HILL	ADDRESS			
CITY, STATE, ZIP TAMARAC, FLORIDA 33321	CITY, STATE, ZIP			
COMPANY AND TITLE LENNAR LAND PARTNERS, A FLORIDA GENERAL PARTNERSHIP	COMPANY AND TITLE			
TELEPHONE (407) 682-9291 FAX (352) 343-8495	TELEPHONE ( ) FAX ( )			
AGENT AUTHORIZED TO SECURE PERMIT (IF AN AGENT IS USED)	CONSULTANT (IF DIFFERENT FROM AGENT)			
NAME	NAME Duane K. Booth, P.E.			
COMPANY AND TITLE	COMPANY AND TITLE Farner, Barley & Associates, Inc.			
ADDRESS	ADDRESS 350 North Sinclair Avenue			
CITY, STATE, ZIP	CITY, STATE, ZIP Tavares, Florida 32778			
TELEPHONE ( ) FAX ( )	TELEPHONE (352) 343-8481 FAX (352) 343-8495			
Name of project, including phase if applicable:SOMERSET ESTATES PHASE II AT KINGS RIDGE  Is this application for part of a multi-phase project?Xyesno  Total applicant-owned area contiguous to the project				

Describe, in g	eneral terms, th	e proposed project, system or activity.	
to drain to exis		r ponds previously permitted in Cambridg	levelopment. 22 acre single family residential project se and Manchester @ Kings Ridge. Permit No.
		pplication meetings, including at the project staff and project representatives.	ct site, with regulatory staff, please list the date(s),
N/A			
		y MSSW/Wetland Resource/ERP/ACOE procedure actions.	permits pending, issued or denied for projects at the
Agency	Date	No.\Type of Application	Action Taken(Pending/Issued/Denied)
SJRWMD	4/12/00	ERP INDIVIDUAL	ISSUED (MOST RECENT)
		<u>4-069-0326M9-ERP</u>	
waters that no provide the no	eed a federal d ames ,addresse	<u>fredge and fill permit and/or authorizated</u> as and zip codes of property owners wh	to occur in, on or over wetlands or other surface tion to use state owned submerged lands. Please hose property directly adjoins the project (excluding adjoining property lines. Attach additional sheets if
		2	
3		4	
		<del></del>	<del></del>
		<del></del>	

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 familier 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.

ROBERT AHRENS, President		
Typed/Printed Name of Applicant (If no Agent is	used) or Agent (If one is so authorized below)	1
Typed/Filled Name of Applicant (If the Agent is	used) of Agent (if one is so authorized below)	!
John Chu	<u>.                                    </u>	
Signature of Applicant/Agent		Date
( PRESIDENT		
(Corporate Title if applicable)		
AN AGENT MAY SIGN ABOVE ONLY IF,THE	APPLICANT COMPLETES THE FOLLOWING	G:
I hereby designate and authorize the agent listed the processing of this application for the permit a supplemental information in support of the applic me, or my corporation, to perform any requireme above. I understand that knowingly making any 373.430, F.S., and 18 U.S.C. Section 1001.	and/or proprietary authorization indicated about cation. In addition, I designate and authorize t ant which may be necessary to procure the pe	ve; and to furnish, on request, the above-listed agent to bind rmit or authorization indicated
Typed/Printed Name of Applicant	Signature of Applicant	Date
(Corporate Title if applicable)		
Please note: The applicant's original signature	re (not a copy) is required above.	
PERSON AUTHORIZING ACCESS TO THE PR	OPERTY MUST COMPLETE THE FOLLOW	'ING:
I either own the property described in this applica after receiving prior notification, to any site visit or Protection, the Water Management District and the the proposed project specified in this application. as may be necessary to make such review and in or personnel to monitor permitted work if a permit	n the property by agents or personnel from the ne U.S. Army Corps of Engineers necessary fo I authorize these agents or personnel to ente nspection. Further, I agree to provide entry to the	Department of Environmental or the review and inspection of er the property as many times
ROBERT AHRENS	( / Sw Colu	
Typed/Printed Name	Signature	Date
PRESIDENT		
Corporate Title if applicable)		<del></del>



### VIA FEDERAL EXPRESS

December 12, 2000

ST. JOHNS RIVER WATER MANAGEMENT DISTRICT 618 E. South Street Orlando, Florida 32801

RE: SOMERSET ESTATES PHASE II & III @ KINGS RIDGE (FBA #941216.114)

To Whom it may concern:

Enclosed please find the following with regards to the above-referenced project:

- 1. Original and five (5) copies of the ERP stormwater permit application.
- 2. Five sets of construction drawings (signed, sealed, & dated).
- 3. Five (5) sets of Stormwater Calculations (signed, sealed & dated).
- 4. Five (5) Notice and Receipt Forms.
- 5. Check in the amount of \$1,000.00.

Should you have any questions with regards to this matter, please feel free to contact our office.

Sincerely,

FARNER, BARLEY & ASSOCIATES, INC.

Duane K. Booth, P.E.

**Project Engineer** 

DKB/sm

**Enclosures** 

cc: Mr. Rob Ahrens, Lennar Homes, Inc. (w/out encl.)

C:\My Documents\WPDOCS\LETTERHEAD.wpd

DEC 12 2000 U-0e1-19411-10 PDS ORLANDO SJR WMD

### KINGS RIDGE NORTH

### STORMWATER DESIGN SUMMARY

Somerset Phase II is located in Section 3 of Township 23S, Range 26E on Hancock Road consisting of approximately 22.79 acres. The property as existing today is an open field.

The stormwater management system is designed to retain the total runoff from the 25 year-96 hour storm event. The holding ponds used are from previously permitted subdivisions in the master permit No. 4-069-0326M9-ERP. This permit is sought to modify the master ERP permit, more specifically, modify drainage basins 5A and 6A. Here, extra free board in the applicable holding ponds can be utilized. Basin B4 in Somerset Phase II drains into the Basin 6A of the master permit. Basin B5 of Somerset Phase II drains into Basin 5A of the master permit. Basin B3 complies with original calculations supplied in the Somerset Phase I calculations.

The Stormwater Calculations meet or exceed the requirements of St. Johns River Water Management District and the City of Clermont.

See ICPR Max Node conditions for comparison of peak stage versus pond max elevation and ponds Recovery analysis for stormwater treatment volume calculation and recovery analysis.

RON/A	AIOP OF POND	TOP IN STEACH	TERDATAVEENTE NOLEMER GRITA	TENEAUSYESNY RECOLDRY BIMES (ETS.)
5 <b>A</b>	187.0	182.48	86,249	1.32
6A	192.0	188.47	70,209	1.79

DEC 12 2000 U-069-19411-10 PDS ORLANDO S.R. WMD

### PDS ROUTING SHEET

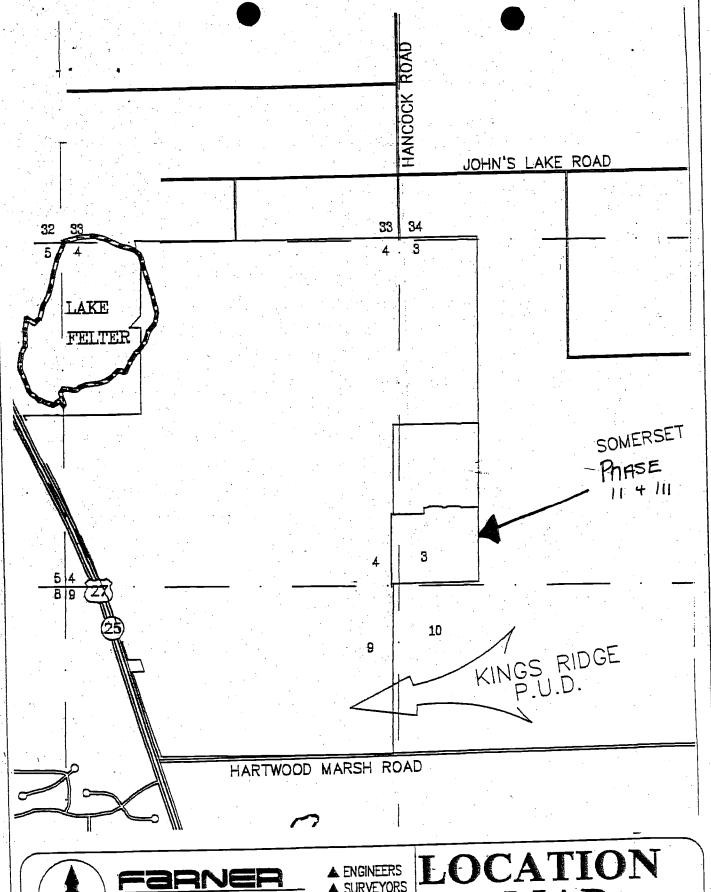
DELIVERED: US Mail HD UPS Fed Ex Other
MAIL TYPE: application mail
RECEIVED ON:BY:
OPENED ON:  BY:  BY:  CHECK ENTERED ON:  10-10-0() BY: 03
CHECK ENTERED ON: 10-10-00 BY: 08
STAMPED IN ON: 6-18-00 BY: 60
NUMBERED ON: 12-20-00 BY: HP
ENTERED INTO GRS ON: 12/20/00 BY: MP
ENTERED INTO ACCESS ON:BY:
COPIED ON: 1212000 BY: HP

### **GRS CHECK OFF LIST**

MSSW#	4-069-19411-10
(FROM THE PRIME	
DATE-RECEIVED_	12-12-00
DATE ENTERED	12-20-00
FEE RECEIPT#	12-12-00 12-20-00 02/110 GRS RECEIPT# ////8
SUBMITTALS	
GRS# / 94//	
PROJECT HEADER	
ADDRESS	
OWNER	·
APPLICANT	
AGENT	
CONSULTANT	
OTHER	
SITE	
TECHNICAL DATA_	
DATA CAPTURED_	
INITIALS W	12/200
REVIEWER'S 27	tesen Nations

# MSSW GIS Processing Sheet

Application # $4-069-1941$	11-10		
Section(s)			
Township(s) 23	· · · · · · · · · · · · · · · · · · ·		2
Range(s) 26			- •· -
Basin Code EB OB U	B WB	WP	Other_
Date Mapped 01-02-01	Acceptable	e? Yes 🗸	No
Map # Quad Na	me <u>. 586</u>	Clean	J-Fr
Additional Quads/Comments	·		
			•
		<del></del>	<del>-</del>
Mapper's Initials	Reviewer		





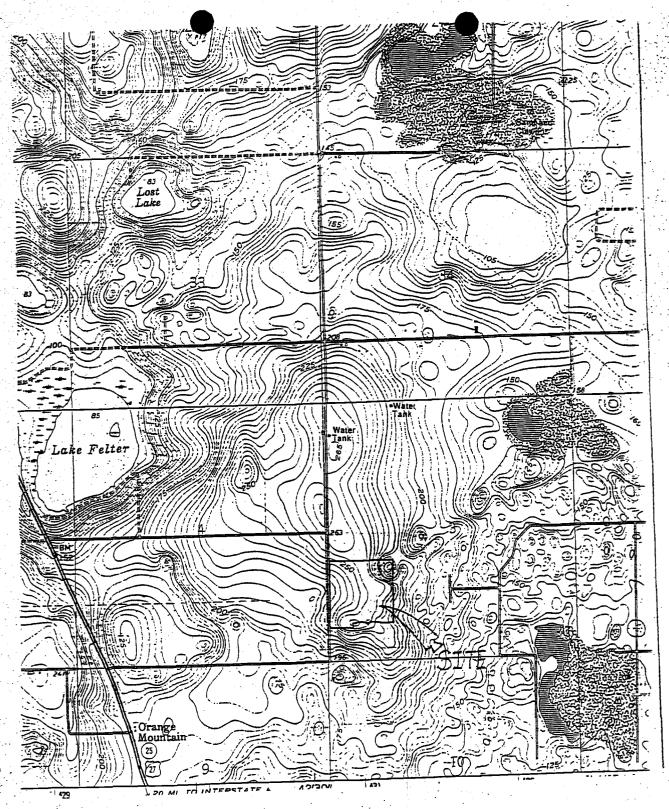
AND ASSOCIATES, INC.

350 North Sinciair Avenue O Tovares, Florida 32778 O (904) 343-8481

### ▲ SURVEYORS

# ▲ PLANNERS

# MAP SCALE 1" = 1500'



# Clermont East, Florida Quadrangle



AND ASSOCIATES, INC.

▲ ENGINEERS ▲ SURVEYORS

▲ PLANNERS

350 North Sincidir Avenue O Tovores, Florida 32778 O (904) 343-8481