

APPLICATION 1719

MANAGEMENT AND STORAGE OF SURFACE WATERS INDIVIDUAL APPLICATION ASSIGNMENT SHEET

Office: ORLA	ANDO Revie	ewer:	ABOODI	PRYNC	SKI
Date Received	d: <u>10/15/97</u>	Dat	e Proces	ssed:	10/16/97
Application 1	Number: 4-069-0326AM4	L-ERP	40-069	-014	OAM-ERR
	ication Number: 4-069				,
Owner: LENN	AR ACTIVE ADULT COMMUN	<u>VITIES</u>			
Applicant:	LENNAR ACTIVE ADULT C	COMMUN	TIES		
Consultant/En	ngineer: <u>FARNER, BARL</u>	LEY & A	ASSOCIATE	ES, INC	<u> </u>
Project Name	: DANBURY MILL BLVD.	EXTENS	SION AT E	KINGS F	RIDGE
THE FOLLOWING APPLICATION:	G INFORMATION IS NEEDE	ED TO A	ADMINIST	RATIVEL	Y COMPLETE THIS
	Signatures				
	Authorization from Ow	wner fo	or Agent		
	Individual/Firm Prepa	aring S	Specifica	ations	
	Name in which Permit	is to	be Issue	ed	
	Entity Responsible fo	or Mair	ntenance	Statem	nent
	Bound Reports (No. Re	eceive	d: <u>5</u>)		
-	Plans (No. Received:	<u>5</u>)			
	Calculations (No. Rec	ceived	: <u>5</u>)	1	
	Notice of Receipt of	Applio	cation	(
	Adequate Map Coordina	ates			
	Fee:1000.00	Recei	ipt Numbe	er:	21514
Comments: R	EC'D NOTICE				
Application :	is adminstratively com	mplete	YES I	ΓM	
RAI must be m	mailed by: <u>11/12/97</u>	Regu:	latory Me	eeting:	12/10/97

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ST. JOHNS RIVER WATER MANAGEMENT DISTRICT P.O. Box 1429 Palatka, Florida 32178-1429	0 021514 DATE (Ch.15 1991
THE SUM OF Janlung mill Blad. OK EOR OFF 4-069-0326 AM	Holding ing Ridges 1-ECP
AMOUNT OF ACCOUNT \$ 1,000. AMOUNT PAID	Lucille Stable

. . .



VIA CERTIFIED MAIL RETURN RECEIPT NO. P 178 130 861

14, October 13, 1997 OCT 15 1997 4.069-0326Am 4 ERP ORLANDO SJR WMD

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

RE: <u>DANBURY MILL BLVD EXTENSION AT KINGS RIDGE</u> (FBA #941216.045)

Dear Alex:

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 and sealed).
- 3. Five (5) sets of Stormwater Calculations (signed and sealed).
- 4. Five (5) Notice and Receipt Forms.
- 5. Check in the amount of \$1,000.00.

Mr. Alex Aboodi Page Two October 13, 1997



PDS ORLANDO SJR WAND

This application is for a modification of an existing permit, therefore the Declarations, Covenants and Restrictions have already been submitted and are on file. 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

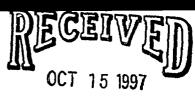
DKB/km

Enclosures

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

Date Ap	FOR AGENCY USE ONLY Application #
	SECTION A
Are a	ny of the activities described in this application proposed to occur in, on, or over wetlands or other surface waters?yesXno
A.	Type of Environmental Resource Permit Requested (check at least one)
X	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)
	_ (onstruction and operation of a new system including dredging or filling in, on or over wetlands and other surface waters.)
<u>X</u>	 Alteration and operation of an existing system which was not previously permitted by a WMD or DEP. Modifiction of a system previously permitted by a WMD or DEP. Provide previous permit numbers: 4-069-0326M2-ERP
	Alteration and operation of a system Extension of permit duration Abandonment of a system Z 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 General Nationwide
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 ACTIVE ADULT COMMUNITIES	COMPANY AND TITLE		
TELEPHONE (800) 233-6569 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		
Is this application for part of a multi-phase project? Total applicant-owned area contiguous to the project Total project area for which a permit is sought Impervious area for which a permit is sought What is the total area (metric equivalent for federally	1.633 ac 0.886 ac funded projects) of work in, on or over wetlands or other surface waters: quare feet hectares square meters ps N/A Acceptable of work in, on or over wetlands or other surface waters: ps N/A Acceptable of work in, on or over wetlands or other surface waters: ps N/A Acceptable of work in, on or over wetlands or other surface waters: ps N/A Acceptable of work in, on or over wetlands or other surface waters: ps		
Street address, road, or other location <u>KINGS RIL</u> City, Zip Code if applicable <u>CLERMON</u>			

Describe, in g	eneral terms, the p	roposed project, system or activity.	
CONS	STRUCTION OF A	PPROXIMATELY 1016 LINEAR FEET C	OF ROADWAY AND DRAINAGE FACILITIES.
		cation meetings, including at the project s aff and project representatives.	site, with regulatory staff, please list the date(s),
N/A			
	fy by number any M any related enforcer		rmits pending, issued or denied for projects at the
Agency	Date	No.\Type of Application	Action Taken(Pending/Issued/Denied)
<u>SJRWMD</u>	<u>8/13/96</u>	ERP INDIVIDUAL	ISSUED
waters that r	need a federal dred	dge and fill permit and/or authorizatio	o occur in, on or over wetlands or other surface on to use state owned submerged lands. Please se property directly adjoins the project (excluding
provide the napplicant). Placessary.	iaines ,addresses lease attach a plan	and zip codes of property owners who view showing the owner's names and a	se property directly adjoins the project (excluding adjoining property lines. Attach additional sheets i
1		2	
3		4	

By signing and submitting this application form, I am applying, or I am applying on benuif 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

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

NODENT AUNENS		
Typed/Printed Name of Applicant (If no Agent is	s used) or Agent (If one is so authorized	below)
	•	6/22/00
· Jahr Com		72/9
Signature of Applicant/Agent		/ Date
L WAS BRESIDENT		
<u>VICE-PRESIDENT</u> (Corporate Title if applicable)	· · · · · · · · · · · · · · · · · · ·	
(Согрогате тъте в аррясаме)		
AN AGENT MAY SIGN ABOVE <u>ONLY</u> IF,THE	APPLICANT COMPLETES THE FOLL	.OWING:
I hereby designate and authorize the agent lister the processing of this application for the permit supplemental information in support of the application, or my corporation, to perform any requirementation in support of the application of the application of the permit supplementation of the permit supple	and/or proprietary authorization indicate lication. In addition, I designate and auti ent which may be necessary to procure	ed above; and to furnish, on request, horize the above-listed agent to bind the permit or authorization indicated
Typed/Printed Name of Applicant	Signature of Applican	nt Date
(Corporate Title if applicable)		
Please note: The applicant's original signature	ure (not a copy) is required above.	
PERSON AUTHORIZING ACCESS TO THE P	ROPERTY MUST COMPLETE THE FO	DLLOWING:
I either own the property described in this application after receiving prior notification, to any site visit of Protection, the Water Management District and the proposed project specified in this application as may be necessary to make such review and or personnel to monitor permitted work if a permitte	on the property by agents or personnel fro the U.S. Army Corps of Engineers neces n. I authorize these agents or personnel inspection. Further, I agree to provide en	om the Department of Environmental ssary for the review and inspection of I to enter the property as many times
ROBERT_AHRENS	· Walu all	~ H/27/1)
Typed/Printed Name	Signature	/ Date
	(
VICE-PRESIDENT		
Corporate Title if applicable)		

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

GIS/ADMINISTRATIVE MSSW APPLICATION TRACKING SHEET

Application Number: 4-069-0326AM4-ERP
Reviewer(s): ABOODI PRYNOSKI
Date Received: 10/15/97
Applicant: LENNAR ACTIVE ADULT COMMUNITIES
Project Name: DANBURY MILL BLVD. EXTENSION AT KINGS RIDGE

MAPPING INFORMATION:
Acceptable as Received: YES
Hydrologic Basin: OKLAWAHA BASIN
MAP NUMBER QUAD
41 CLERMONT-E
Date Application Entered:/_/
Date Application Mapped: 10/20/97 Initials: AR

Request for Additional Information must be mailed by: 11/12/97
Regulatory Meeting Date if determined technically/administratively Complete: 12/10/97
INFORMATION PROVIDED BY REVIEWING STAFF:
Date 1st RAI sent: Date 2nd RAI sent: Date 2nd Resp. received: Date 3rd RAI sent: Date 3rd Resp. received: Date 4th RAI sent: Date 4th Resp. received: Date 4th Resp. received:
Schedule for Regulatory Meeting (Approval/Denial)

^{**} NOTE: PLEASE RETURN WITH THE TSR FOLDER.

Eg.

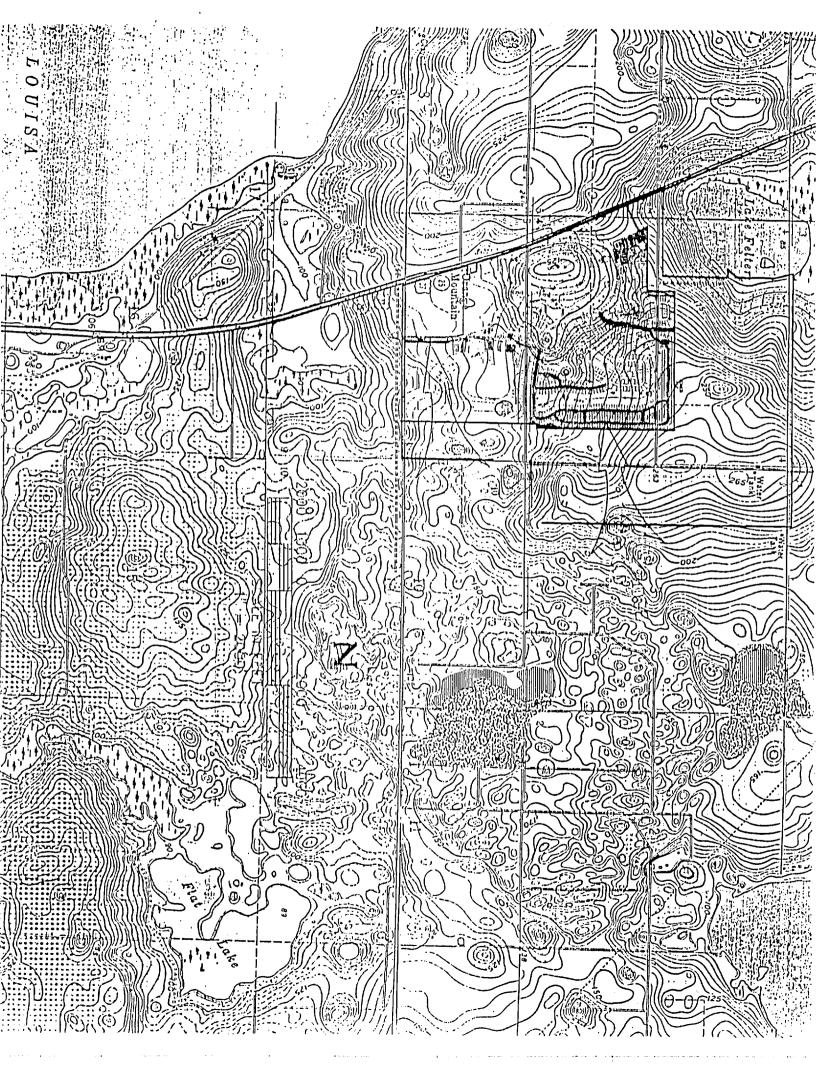
SECTION C ENVIRONMENTAL RESOURCE PERMIT NOTICE OF RECEIPT OF APPLICATION

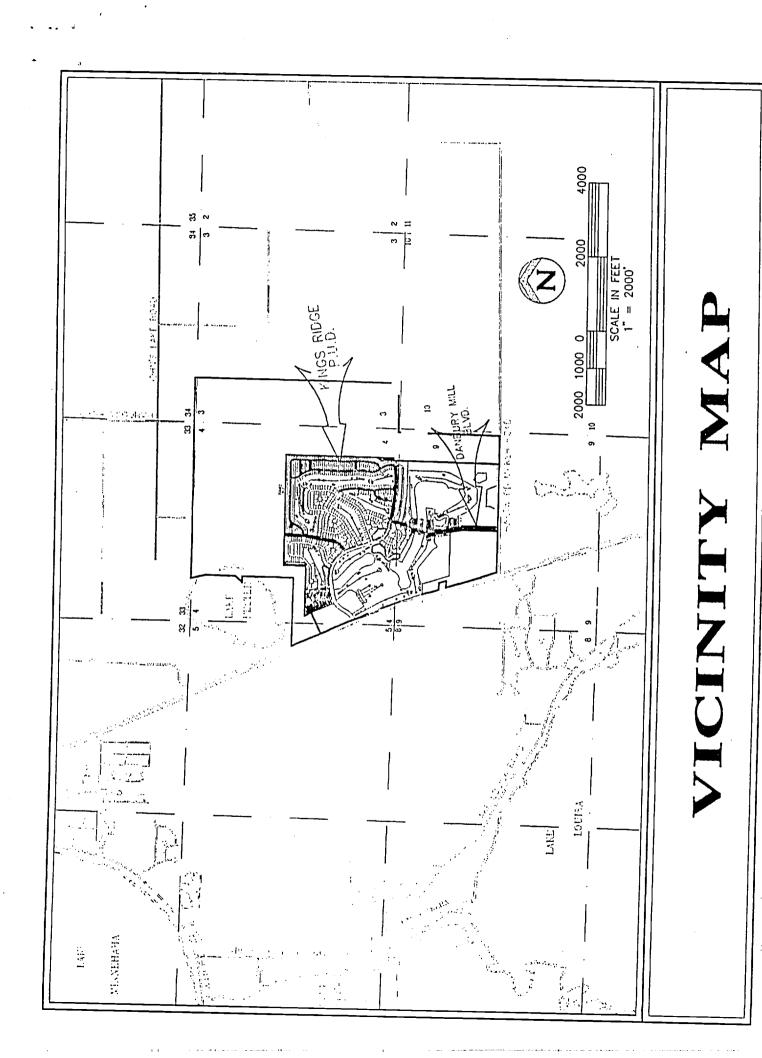
This information is required in addition to that required in other sections of the application. Please submit five copies of this notice of receipt of application and all attachments. Please submit all information on 8 1/2" x 11" paper.

Owner. Applic	Name:DANBURY MILL BLVD., EXTENSION AT KINGS RIDGE County:LAKE LENNAR ACTIVE ADULT COMMUNITIES ant:SAME AS ABOVE ant's Address:7600 NOB HILL, TAMARAC, FLORIDA 33321
1.	Indicate the project boundaries on a USGS quadrangle map reduced or enlarged as necessary to legibly show the entire project. If not apparent from the quad map, attach a location map showing a north arrow and a graphic scale; Section(s), Township(s), and Range(s); and sufficient detail to allow a person unfamiliar with the site to find it.
2.	Provide the names of all wetlands, or other surface waters that would be dredged, filled, impounded, diverted, drained, or would receive discharge (either directly or indirectly), or would otherwise be impacted by the proposed activity, and specify if they are in an Outstanding Florida Water or Aquatic Preserve:
3 .	Attach a depiction (plan and section views), which clearly shows the works or other facilities proposed to be constructed. Use a scale sufficient to show the location and type of works. Use multiple sheets, if necessary.
4.	Briefly describe the proposed project (such as "construct a deck with boatshelter", "replace two existing culverts", "construct surface water management system to serve 150 acre residential development"):
5.	Specify the acreage of wetlands or other surface waters, if any, that are proposed to be disturbed, filled, excavated, or otherwise impacted by the proposed activity: O
6.	Provide a brief statement describing any proposed mitigation for impacts to wetlands and other surface waters (attach additional sheets if necessary): N/A
Applic Office Date	ration Name: Stanae Statue Statut Commisation Number: 4-069-0326 AM-ERP where the application can be inspected: 0F/Ando to be removed: 17-3-97

FORM NUMBER 40C-4.900(1) Pg 1 o OCT 15 1997

PDS ORLANDO SJR WMD





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Date Ap Propose	FOR AGENCY USE ONLY Application # 4-069-0326 AM 4-ERP polication Received Date Application Received 10-15-97 ed Project Lat. "Fee Received \$ / 000-000 The Received \$ / 000-000 The Received 10/5/97 Project Use Codes Assigned Reviewers (1000-0000 Reviewer#'s Prynaski
	SECTION A
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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 Nationwide
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 ACTIVE ADULT COMMUNITIES	COMPANY AND TITLE		
TELEPHONE (800) 233-6569 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		
Is this application for part of a multi-phase project? Total applicant-owned area contiguous to the project Total project area for which a permit is sought Impervious area for which a permit is sought What is the total area (metric equivalent for federally N/A acres so If a docking facility, the number of proposed new slip Project location (use additional sheets, if needed) County(ies) Lake Section(s) 9 Township(s) Section(s) 1 Township(s) Land Grant name, if applicable N/A	1.633 ac 0.886 ac funded projects) of work in, on or over wetlands or other surface waters: quare feet hectares square meters ps N/A		
Tax Parcel Identification Number N/A Street address, road, or other location KINGS RIDGE BOULEVARD City, Zip Code if applicable CLERMONT, FLORIDA			

Describe, in g	eneral terms, the	proposed project, system o	r activity.	
CON	STRUCTION OF A	APPROXIMATELY 1016 LI	NEAR FEET OI	F ROADWAY AND DRAINAGE FACILITIES.
		lication meetings, including staff and project representat		ite, with regulatory staff, please list the date(s),
N/A				
	·			
	fy by number any any related enforc		ERP/ACOE perr	mits pending, issued or denied for projects at th
Agency	Date	No.\Type of Appli	cation	Action Taken(Pending/Issued/Denied)
SJRWMD	8/13/96	ERP INDIVIDU	AL	ISSUED
				·
		, <u> </u>		
		-		
				occur in, on or over wetlands or other surfa
provide the r	ames ,addresses	s and zip codes of property	y owners whose	nto use state owned submerged lands. Plea e property directly adjoins the project (excluding djoining property lines. Attach additional sheets
1		,	2	
				·
				
3	_ _		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 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

Typed/Printed Name of Applicant (If no Agent is used	d) or Agent (If one is so authorized below	w)
1/15 Column		8/27/07
Signature of Applicant/Agent		Date
\mathcal{C}		
VICE-PRESIDENT		
(Corporate Title if applicable)	·	
AN AGENT MAY SIGN ABOVE ONLY IF, THE APP	LICANT COMPLETES THE FOLLOW!	NG:
I hereby designate and authorize the agent listed about the processing of this application for the permit and/o supplemental information in support of the application me, or my corporation, to perform any requirement w above. I understand that knowingly making any false 373.430, F.S., and 18 U.S.C. Section 1001.	or proprietary authorization indicated ab n. In addition, I designate and authorize thich may be necessary to procure the p	ove; and to furnish, on request, e the above-listed agent to bind permit or authorization indicated
Typed/Printed Name of Applicant	Signature of Applicant	Date
(Corporate Title if applicable)		
Please note: The applicant's original signature (I	not a copy) is required above.	
PERSON AUTHORIZING ACCESS TO THE PROP	ERTY MUST COMPLETE THE FOLLO	WING:
I either own the property described in this application after receiving prior notification, to any site visit on the Protection, the Water Management District and the Uthe proposed project specified in this application. I a as may be necessary to make such review and insperor personnel to monitor permitted work if a permit is	e property by agents or personnel from the .S. Army Corps of Engineers necessary uthorize these agents or personnel to encion. Further, I agree to provide entry to	ne Department of Environmental for the review and inspection of onter the property as many times
ROBERT_AHRENS(1/de /Min	_ P/27/97
Typed/Printed Name	Signature	Date
VICE-PRESIDENT		
Corporate Title if applicable)		

GIS/ADMINISTRATIVE MSSW APPLICATION TRACKING SHEET

Application Number: -4-069-0326AM4-ERP 40-069-0196 AM-ERI
Reviewer(s): ABOODI PRYNOSKI
Date Received: 10/15/97
Applicant: LENNAR ACTIVE ADULT COMMUNITIES
Project Name: DANBURY MILL BLVD. EXTENSION AT KINGS RIDGE

MAPPING INFORMATION:
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Hydrologic Basin: OKLAWAHA BASIN
MAP NUMBER QUAD
41 CLERMONT-E
Date Application Entered: _/_/
Date Application Mapped: 10/20/97 Initials: AR

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