



Florida Department of Environmental Protection

Southwest District
13051 North Telecom Parkway
Temple Terrace, Florida 33637-0926

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

STATE OF FLORIDA INDUSTRIAL WASTEWATER FACILITY PERMIT

PERMITTEE:	PERMIT NUMBER:	FL0031895 (Minor)
Florida Crushed Stone Company	PA FILE NUMBER:	FL0031895-003-IW3S
P.O. Box 147	ISSUANCE DATE:	March 2, 2007
Center Hill, FL 33514	EXPIRATION DATE:	March 1, 2012

RESPONSIBLE AUTHORITY:

Mr. Matt D. Mouncey
Environmental Manager

FACILITY:

Center Hill Mine
530 Kings Highway (Highway 48 West)
Center Hill, FL 33514
Sumter County

Latitude: 28° 40' 4" N Longitude: 82° 0' 56" W

This permit is issued under the provisions of Chapter 403, Florida Statutes (F.S.) and applicable rules of the Florida Administrative Code (F.A.C.), and constitutes authorization to discharge to waters of the state under the National Pollutant Discharge Elimination System (NPDES). The above named permittee is hereby authorized to construct and operate the facilities shown on the application and other documents attached hereto or on file with the Department and made a part hereof and specifically described as follows:

This permit authorizes continued operation of Florida Crushed Stone (FCS) Center Hill Limestone Mine. This facility mines limestone using an open pit mining method. The mining process consists of dewatering the active quarry, excavating the limestone allowing the stone to dry, crushing and sizing and conveying the rock to stockpiles for off-site distribution. Gregg Enterprises, Inc. operates the limestone grinding processing facility onsite.

WASTEWATER TREATMENT:

The limestone grinding facility uses approximately 360,000 gallons per day of water from the recirculation system. This water is pumped from the inactive south quarry and used as non-contact cooling water at the facility and then returned to the inactive south quarry for recirculation. The facility does not require additional water to be put into the recirculation system and no chemicals are added to the water during the cooling operation. Prior to discharge to Jumper Creek, the discharge from the active quarry is routed through a hydraulic barrier ditch to recharge the Floridan Aquifer. Recharge shall occur in both the hydraulic barrier ditch and the inactive quarries. Water shall be retained in the inactive quarries, except during periods when regional hydro-geologic conditions exceed the Outfall D-001 weir elevation (discharge at an elevation above 85 feet NGVD) and/or storm events greater than a 25 year-24

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hour storm event. Under these conditions, excess water will be discharged by gravity flow into Jumper Creek from the North Quarry.

A proposed truck wash facility will be constructed and operated at the Center Hill Mine. The truck wash facility will use approximately 12,000 gallons of water per week during a four-hour washing period. Truck wash water will be collected in a collection sump and pumped into a 600-gallon reclaimed water settling tank, two 1550-gallon settling tanks for settling (primary and secondary) and chlorination. Reuse water from the settling tanks is pumped to an additional solids separator, an oil/water separator and finally polished through multimedia filtration and carbon filtration. Makeup water for the truck wash will be non-contact cooling water from the limestone grinding facility and no additional water will be used to wash the trucks. A valve will be installed on the return cooling water pipe after it passes through the grinding plant and before it discharges into the inactive south quarry. When makeup water is required, the valve will be opened and non-contact cooling discharge water will be used to wash trucks.

EFFLUENT DISPOSAL:

Surface Water Discharge:

An existing daily maximum flow shall be discharge to Jumper Creek (Class III Fresh waters), D-001 only during periods when regional hydro-geologic conditions exceed the Outfall D-001 weir elevation (discharge at an elevation above 85 feet NGVD) and/or storm events greater than a 25 year-24 hour storm event. The D-001 is located approximately at latitude 28° 40' 4.3" N, longitude 82° 00' 42.4" W.

IN ACCORDANCE WITH: The limitations, monitoring requirements and other conditions as set forth in Part I through Part VIII on pages 3 through 16 of this permit.

I. Effluent Limitations and Monitoring Requirements

A. Surface Water Discharges

1. During the period beginning on the issuance date and lasting through the expiration date of this permit, the permittee is authorized to discharge commingled wastewater and stormwater from Outfall D-001. Such discharge shall be limited and monitored by the permittee as specified below and reported in accordance with condition I.E.3.:

Parameters (units)	Discharge Limitations			Monitoring Requirements		
	Monthly Average	Daily Maximum	Daily Minimum	Monitoring Frequency	Sample Type	Sample Point
Flow (MGD)	Report See Cond I.A.8	Report	--	Continuous	Recorder	EFF-1
Turbidity (NTU)	--	See Cond. I.A.3	--	Monthly, When Discharging	Grab	EFF-1
Turbidity (Background) (NTU)	--	Report	--	Monthly, When Discharging	Grab	SWB-1
Oil and Grease (MG/L)	--	50	--	Monthly, When Discharging	Grab	EFF-1
Temperature (F), Water (DEG.F)	--	Report	--	Monthly, When Discharging	Grab	EFF-1
pH (SU)	--	8.5	6.0	Monthly, When Discharging	Grab	EFF-1
Dissolved Oxygen (MG/L)	--	--	5.0	Monthly, When Discharging	Grab	EFF-1
Specific Conductance (umhos/cm)	--	1275	--	Monthly, When Discharging	Grab	EFF-1
Whole Effluent Toxicity (Acute)	See Permit Condition I.A.4					EFF-1

2. Effluent samples shall be taken at the monitoring site locations listed in permit condition I.A.1 and as described below:

Sample Point	Description of Monitoring Location
EFF-1	Point of discharge (Outfall 001) from the North Quarry
SWB-1	Natural background location within Jumper Creek

3. The limit for Turbidity shall be calculated as follows:

$$\text{Limit} = \text{Background Turbidity} + 29 \text{ NTU}$$

The measured effluent value shall be recorded on the DMR in the parameter row for Turbidity (effluent). The measured background value shall be recorded on the DMR in the parameter row for Turbidity (background). The calculated effluent limit shall be recorded on the DMR in the parameter row for Turbidity (calculated limit). Compliance with the effluent limitation is determined by calculating the difference between the measured effluent value and the calculated effluent limit. The compliance value shall be recorded on the DMR in the

parameter row for Turbidity (effluent minus calculated limit). If the compliance value is greater than 0.00, the permittee will be considered in violation of the limitation.

4. The permittee shall comply with the following requirements to evaluate acute whole effluent toxicity of the discharge from outfall D-001.
 - a. Effluent Limitation
 - (1) Whole effluent acute toxicity shall not exceed in any "routine" or in any "additional follow-up" test an LC50 of less than 100% effluent. [Rule 62-302.200(1), Rule 62-302.500(1)(a)4., and Rule 62-4.244(3)(a), F.A.C.]
 - b. Monitoring Frequency
 - (1) "Routine" toxicity tests shall be conducted *each discharge event, not to exceed bi-monthly*, the first starting in Effective date of the permit issuance, and lasting for the duration of this permit unless a reduction in the frequency of monitoring is granted in writing by the Department
 - (2) Upon completion of six consecutive, valid "routine" tests that demonstrate compliance with the effluent limitation in 4.a.(1) above, the permittee may submit a written request to the Department for a reduction in monitoring frequency. The Department shall review this request within 45 days of receipt and approve or deny the request in writing. Materials submitted to the Department for review should include a summary of the data and the complete bioassay reports for all tests being considered. In no case shall the frequency of monitoring be reduced to less than annually. Requested reductions in monitoring shall only become effective upon Department approval.
 - (3) If a test within the sequence of the six is deemed invalid, but is replaced by a repeat valid test initiated within seven days of the invalidation, the invalid test will not be counted against the requirement for six consecutive valid tests for the purpose of evaluating the reduction of monitoring frequency. If two or more invalidations occur, this provision does not apply.
 - c. Test Requirements
 - (1) Routine Tests: All routine tests shall be conducted using a control (0% effluent) and a minimum of five dilutions: 100%, 50%, 25%, 12.5% and 6.25% effluent.
 - (2) Additional Follow-up Tests, if required:
 - (a) If a routine test does not meet the acute toxicity limitation in 4.a.(1) above, the permittee shall conduct two additional follow-up tests on each species that failed the test.
 - (b) The first and second additional follow-up tests shall be conducted using a control (0% effluent) and a minimum of five dilutions: 100%, 50%, 25%, 12.5% and 6.25% effluent. All test results shall be statistically analyzed according to the Appendices in EPA-821-R-02-012.
 - (c) The first test shall be initiated immediately upon notification of the failed routine test. The remaining additional follow-up tests shall be conducted weekly thereafter until a total of two valid additional follow-up tests are completed
 - (3) The permittee shall conduct 96-hour acute static renewal multi-concentration toxicity tests using the daphnid, *Ceriodaphnia dubia*, and the bannerfin shiner, *Cyprinella leedsii*, concurrently
 - (4) All test species, procedures and quality assurance criteria used shall be in accordance with Methods for Measuring Acute Toxicity of Effluents and Receiving Waters to Freshwater and Marine Organisms, EPA-821-R-02-012. Any deviation of the bioassay procedures outlined herein shall be submitted in writing to the Department for review and approval prior to use. In the event the above method is revised, the permittee shall conduct acute toxicity testing in accordance with the revised method.
 - (5) The control water and dilution water used will be moderately hard water as described in EPA-821-R-02-012, Table 7.
 - d. Sampling Requirements
 - (1) All tests will be conducted on a single grab sample of final effluent. If the duration of the discharge is less than 24-hours, the duration of discharge shall be documented on the chain of custody.
 - (2) Results for each additional test shall include the determination of LC50 values with 95% confidence limits.

e. Quality Assurance Requirements

- (1) A standard reference toxicant (SRT) quality assurance (QA) acute toxicity test shall be conducted with each species used in the required toxicity tests either concurrently or started no more than 30 days before the date of each routine or additional follow-up test conducted. The SRT-QA data shall be included in the reports for each companion routine or additional follow-up test required.
- (2) If the mortality in the control (0% effluent) exceeds 10% for either species in any test, the test for that species (including the control) shall be invalidated and the test repeated.
- (3) If, during any routine separate grab sample test, 100% mortality occurs prior to the end of the test and control mortality is less than 10% at that time, that test (including the control) shall be terminated with the conclusion that the test fails and constitutes non-compliance.
- (4) Additional follow-up tests shall be evaluated for acceptability based on the concentration-response relationship, as required by EPA-821-R-02-012, Section 12.2.6.2., and included with the bioassay reports.

f. Reporting Requirements

- (1) Results from all required tests shall be reported on the Discharge Monitoring Report (DMR) as follows:
 - (a) Routine Test Results: If an LC50 >100% effluent occurs in the grab sample test for the test species, ">100%" should be entered on the DMR for that test species. If an LC50 <100% effluent occurs, the calculated LC50 effluent concentration shall be entered on the DMR for that test species.
 - (b) Additional Follow-up Test Results: Report the calculated LC50 value for that test species and the 95% confidence limits.
- (2) A bioassay laboratory report for the routine test shall be prepared according to EPA-821-R-02-012, Section 12, Report Preparation and Test Review, and mailed to the Department at the address below within 30 days of the completion of the test.
- (3) For additional follow-up tests, a single bioassay laboratory report shall be prepared according to EPA-821-R-02-012, Section 12, and mailed within 45 days of completion of the second valid additional follow-up test. If any additional follow-up test or two consecutive routine tests do not meet the effluent limitation specified in 4.a.(1) above, the permittee shall contact the Department within 30 days of the laboratory report submittal to discuss the corrective actions necessary to remedy the observed acute toxicity.
- (4) All bioassay reports shall be sent to:

Florida Department of Environmental Protection
Southwest District Office
13051 North Telecom Parkway
Temple Terrace, Florida 33637-0926

5. At the time of permit renewal, the permittee shall sample the effluent for the following parameters: pH, turbidity, specific conductance, chloride, temperature, fluoride, sulfate, sodium, aluminum, and lead. These parameters shall be analyzed in accordance with Rule 62-302.530 Surface Water Quality Standards for Class III Fresh Waters. All analytical results shall be provided in the permit renewal application submittal.

send with renewal application.

6. There shall be no discharge of floating solids or visible foam in other than trace amounts.
7. The discharge shall not cause a visible sheen on the receiving water.
8. Water shall be retained in the inactive quarries, except during periods when regional hydro-geologic conditions exceed the Outfall D-001 weir elevation (discharge at an elevation above 85 feet NGVD) and/or storm events greater than a 25 year-24 hour storm event. Under these conditions, excess water will be discharged by gravity flow into Jumper Creek from the North Quarry.

B. Underground Injection Control Systems

1. This section is not applicable to this facility.

C. Land Application Systems

1. This section is not applicable to this facility.

D. Other Methods of Disposal or Recycling

1. There shall be no discharge of industrial wastewater from this facility to ground or surface waters, except as authorized by this permit.

E. Other Limitations and Monitoring and Reporting Requirements

1. The sample collection, analytical test methods and method detection limits (MDLs) applicable to this permit shall be in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate. The list of Department established analytical methods, and corresponding MDLs (method detection limits) and PQLs (practical quantification limits), which is titled "Florida Department of Environmental Protection Table as Required By Rule 62-4.246(4) Testing Methods for Discharges to Surface Water" is available at <http://www.dep.state.fl.us/labs/guidance/index.htm>. The MDLs and PQLs as described in this list shall constitute the minimum acceptable MDL/PQL values and the Department shall not accept results for which the laboratory's MDLs or PQLs are greater than those described above unless alternate MDLs and/or PQLs have been specifically approved by the Department for this permit. Any method included in the list may be used for reporting as long as it meets the following requirements:
 - a. The laboratory's reported MDL and PQL values for the particular method must be equal or less than the corresponding method values specified in the Department's approved MDL and PQL list;
 - b. The laboratory reported MDL for the specific parameter is less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Parameters that are listed as "report only" in the permit shall use methods that provide a MDL, which is equal to or less than the applicable water quality criteria stated in 62-302, F.A.C.; and
 - c. If the MDLs for all methods available in the approved list are above the stated permit limit or applicable water quality criteria for that parameter, then the method with the lowest stated MDL shall be used.

When the analytical results are below method detection or practical quantification limits, the permittee shall report the actual laboratory MDL and/or PQL values for the analyses that were performed following the instructions on the applicable discharge monitoring report.

Where necessary, the permittee may request approval of alternate methods or for alternative MDLs or PQLs for any approved analytical method. Approval of alternate laboratory MDLs and PQLs are not necessary if the laboratory reported MDLs and PQLs are less than or equal to the permit limit or the applicable water quality criteria, if any, stated in Chapter 62-302, F.A.C. Approval of an analytical method not included in the above-referenced list is not necessary if the analytical method is in accordance with 40 CFR 136.

2. Parameters which must be monitored as a result of a surface water discharge shall be analyzed using a sufficiently sensitive method to assure compliance with applicable water quality standards and effluent limitations in accordance with 40 CFR Part 136. All monitoring shall be representative of the monitored activity.
3. Monitoring requirements under this permit are effective on the first day of the second month following permit issuance. Until such time, the permittee shall continue to monitor and report in accordance with previously effective permit requirements, if any. During the period of operation authorized by this permit, the permittee shall complete and submit to the Southwest District Office Discharge Monitoring Reports (DMRs) in accordance with the frequencies specified by the REPORT type (i.e., monthly, toxicity, quarterly, semiannual, annual, etc) indicated on the DMR forms attached to this permit. Monitoring results for each monitoring period shall be submitted in accordance with the associated DMR due dates below.

REPORT Type on DMR	Monitoring Period	DMR Due Date
Monthly or Toxicity	first day of month -- last day of month	28 th day of following month
Quarterly	January 1 - March 31 April 1 - June 30 July 1 - September 30 October 1 - December 31	April 28 July 28 October 28 January 28
Semiannual	January 1 -- June 30 July 1 - December 31	July 28 January 28
Annual	January 1 -- December 31	January 28

DMRs shall be submitted for each required monitoring period including months of no discharge.

The permittee shall make copies of the attached DMR form(s) and shall submit the original completed DMR form(s) to the address specified below: (Please submit a copy of the DMR to the Southwest District Office)

Originals to:
 Department of Environmental Protection
 Wastewater Compliance Evaluation Section
 Mail Station 3551
 Twin Towers Office Building
 2600 Blair Stone Road
 Tallahassee, Florida 32399-2400

Copies to:
 FDEP-Southwest District
 Industrial Wastewater Program
 Southwest District Office
 13051 North Telecom Parkway
 Temple Terrace, Florida 33637-0926
 Facsimile (813) 632-7662

4. Unless specified otherwise in this permit, all reports and notifications required by this permit, including twenty-four hour notifications, shall be submitted to or reported to the Southwest District Office at the address specified below:

Southwest District Office
 13051 North Telecom Parkway
 Temple Terrace, FL 33637-0926

Phone Number - (813) 632-7600
 FAX Number - (813) 632-7662 (All FAX copies shall be followed by original copies.)

5. All reports and other information shall be signed in accordance with requirements of Rule 62-620.305, F.A.C.
6. The permittee shall provide safe access points for obtaining representative samples which are required by this permit.
7. If there is no discharge from the facility on a day scheduled for sampling, the sample shall be collected on the day of the next discharge.
8. Any bypass of the treatment facility which is not included in the monitoring specified in sections I.A, I.B, I.C, or I.D, is to be monitored for flow and all other required parameters. For parameters other than flow, at least one grab sample per day shall be monitored. Daily flow shall be monitored or estimated, as appropriate, to obtain reportable data. All monitoring results shall be reported on the appropriate DMR.

II. Industrial Sludge Management Requirements

1. This section not applicable to this facility.

III. Ground Water Monitoring Requirements

1. This section is not applicable to this facility.

IV. Other Land Application Requirements

1. This section is not applicable to this facility.

V. Operation and Maintenance Requirements

A. Treatment and Disposal Facilities

1. The permittee shall ensure that the operation of this facility is as described in the application and supporting documents.
2. The operation of the pollution control facilities described in this permit shall be under the supervision of a person who is qualified by formal training and/or practical experience in the field of water pollution control.

B. Record keeping Requirements:

- 1 The permittee shall maintain the following records on the site of the permitted facility and make them available for inspection:
 - a. Records of all compliance monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, including, if applicable, a copy of the laboratory certification showing the certification number of the laboratory, for at least three years from the date the sample or measurement was taken;
 - b. Copies of all reports, other than those required in items a. and f. of this section, required by the permit for at least three years from the date the report was prepared, unless otherwise specified by Department rule;
 - c. Records of all data, including reports and documents used to complete the application for the permit for at least three years from the date the application was filed, unless otherwise specified by Department rule;
 - d. A copy of the current permit;
 - e. A copy of any required record drawings,
 - f. Copies of the logs and schedules showing plant operations and equipment maintenance for three years from the date on the logs or schedule.

VI. Schedules

1. A Best Management Practices (BMP) Plan shall be prepared and implemented in accordance with Part VII of this permit and the following schedule:

Action Item		Scheduled Completion Date
1	Continue Implementing Existing BMP Plan	Issuance Date of Permit

2. The following construction schedule shall be followed, unless notification of a schedule revision is provided and acceptable to the Department:

Implementation Step		Completion Date
1	Completion of Construction of truck wash facility	Within 24-months of permit issuance
2	Submission of DEP Form 62-620.910(12), "Certification of Completion of Construction" for both truck wash facility and Emergency Spillway	Within 30 days of completion of construction
3	Submission of Record Drawings	Within six (6) months of placing truck wash.
4	Complete of Construction of Emergency Spillway	Within six (6) months of permit issuance.

3. The permittee shall achieve compliance with the other conditions of this permit as follows:

Operational level attained Issuance Date of permit

4. No later than 14 calendar days following a date identified in the above schedule(s) of compliance, the permittee shall submit either a report of progress or, in the case of specific actions being required by an identified date, a written notice of compliance or noncompliance. In the latter case, the notice shall include the cause of noncompliance, any remedial actions taken, and the probability of meeting the next scheduled requirement.

VII. Other Specific Conditions

A. Specific Conditions Applicable to All Permits

1. Drawings, plans, documents or specifications submitted by the permittee, not attached hereto, but retained on file at the Southwest District Office, are made a part hereof.
2. Where required by Chapter 471 (P.E.) or Chapter 492 (P.G.) F.S., applicable portions of reports to be submitted under this permit, shall be signed and sealed by the professional(s) who prepared them.
3. This permit satisfies Industrial Wastewater program permitting requirements only and does not authorize operation of this facility prior to obtaining any other permits required by local, state or federal agencies.
4. The permittee shall provide verbal notice to the Department as soon as practical after discovery of a sinkhole within an area for the management or application of wastewater or sludge. The permittee shall immediately implement measures appropriate to control the entry of contaminants, and shall detail these measures to the Department in a written report within 7 days of the sinkhole discovery.

B. Specific Conditions Related to Construction

1. Within thirty days of completion of construction, the permittee shall submit to the Department a completed "Certification of Completion of Construction" (DEP Form 62-620.910(12)) signed and sealed by the engineer of record or other engineer registered in the state of Florida.
2. Record drawings shall be prepared and made available in accordance with Rule 62-620.410(6), F.A.C., and the Department of Environmental Protection Guide to Wastewater Permitting within six months of placing the facilities into operation.

C. Duty to Reapply

- 1 The permittee shall apply for renewal of this permit at least 180 days before the expiration date of the permit using the appropriate forms listed in Rule 62-620.910, F.A.C., including submittal of the appropriate processing fee set forth in Rule 62-4.050, F.A.C. The existing permit shall not expire until the Department has taken final action on the application renewal in accordance with the provisions of 62-620.335(3) and (4), F.A.C.

D. Specific Conditions Related to Best Management Practices

1. **BMP Plan:**

For purposes of this part, the terms "pollutant" or "pollutants" refer to any substance listed as toxic under Section 307(a)(1) of the Clean Water Act (the "Act"), oil, as defined in Section 311(a)(1) of the Act, and any substance listed as hazardous under Section 311 of the Act. The permittee shall develop and implement a Best Management Practices (BMP) plan which prevents, or minimizes, the potential for the release of pollutants from ancillary activities, including material storage areas; plant site runoff; in-plant transfer, process and material handling areas; loading and unloading operations; and sludge and waste disposal areas, to the waters of the State through plant site runoff; spillage or leaks; sludge or waste disposal; or drainage from raw material storage.

2. **Implementation:**

The BMP plan shall be developed and implemented in accordance with the schedule contained in Part VI of this permit.

3. **General Requirements:**

The BMP plan shall:

- a. Be documented in narrative form, and shall include any necessary plot plans, drawings or maps.
- b. Establish specific objectives for the control of pollutants.
 - (1) Each facility component or system shall be examined for its potential for causing a release of significant amounts of pollutants to waters of the State due to equipment failure, improper operation, natural phenomena such as rain or snowfall, etc.
 - (2) Where experience indicates a reasonable potential for equipment failure (e.g., a tank overflow or leakage), natural conditions (e.g., precipitation), or other circumstances to result in significant amounts of pollutants reaching surface waters, the plan should include a prediction of the direction, rate of flow, and total quantity of pollutants which could be discharged from the facility as a result of each condition or circumstance.
- c. Establish specific best management practices to meet the objectives identified under paragraph b. of this subsection, addressing each component or system capable of causing a release of significant amounts of pollutants to the waters of the State, and identifying specific preventative or remedial measures to be implemented.
- d. Be reviewed by plant engineering staff and plant manager.

4. **Documentation:**

The permittee shall maintain the BMP plan at the facility and shall make the plan available to the Department upon request.

5. BMP Plan Modification:

The permittee shall amend the BMP plan whenever there is a change in the facility or change in the operation of the facility which materially increases the potential for the ancillary activities to result in a discharge of significant amounts of pollutants.

6. Modification for Ineffectiveness:

If the BMP plan proves to be ineffective in achieving the general objective of preventing the release of significant amounts of pollutants to surface waters and the specific objectives and requirements under paragraphs b. and c. of item 3, the permit shall be subject to modification pursuant to rule 62-620.325, F.A.C., to incorporate revised BMP requirements.

E. Specific Conditions Related to Existing Manufacturing, Commercial, Mining, and Silviculture Wastewater Facilities or Activities

1. Existing manufacturing, commercial, mining, and silvicultural wastewater facilities or activities that discharge into surface waters shall notify the Department as soon as they know or have reason to believe:
 - a. That any activity has occurred or will occur which would result in the discharge, on a routine or frequent basis, of any toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following levels
 - (1) One hundred micrograms per liter,
 - (2) Two hundred micrograms per liter for acrolein and acrylonitrile; five hundred micrograms per liter for 2,4-dinitrophenol and for 2-methyl-4,6-dinitrophenol; and one milligram per liter for antimony, or
 - (3) Five times the maximum concentration value reported for that pollutant in the permit application.
 - b. That any activity has occurred or will occur which would result in any discharge, on a non-routine or infrequent basis, of a toxic pollutant which is not limited in the permit, if that discharge will exceed the highest of the following levels
 - (1) Five hundred micrograms per liter,
 - (2) One milligram per liter for antimony, or
 - (3) Ten times the maximum concentration value reported for that pollutant in the permit application.

F. Reopener Clause

1. The permit shall be revised, or alternatively, revoked and reissued in accordance with the provisions contained in Rules 62-620.325 and 62-620.345, F.A.C., if applicable, or to comply with any applicable effluent standard or limitation issued or approved under Sections 301(b)(2)(C) and (D), 304(b)(2) and 307(a)(2) of the Clean Water Act (the Act), as amended, if the effluent standards, limitations, or water quality standards so issued or approved:
 - a. Contains different conditions or is otherwise more stringent than any condition in the permit/or;
 - b. Controls any pollutant not addressed in the permit.

The permit as revised or reissued under this paragraph shall also contain any other requirements of the Act then applicable.

2. The permit may be reopened to adjust effluent limitations or monitoring requirements should future Water Quality Based Effluent Limitation determinations, water quality studies, DEP approved changes in water quality standards, or other information show a need for a different limitation or monitoring requirement.

3. The Department may develop a Total Maximum Daily Load (TMDL) during the life of the permit. Once a TMDL has been established and adopted by rule, the Department shall revise this permit to incorporate the final findings of the TMDL.

VIII. General Conditions

1. The terms, conditions, requirements, limitations and restrictions set forth in this permit are binding and enforceable pursuant to Chapter 403, F.S. Any permit noncompliance constitutes a violation of Chapter 403, F.S., and is grounds for enforcement action, permit termination, permit revocation and reissuance, or permit revision. *[62-620.610(1), F.A.C.]*
2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications or conditions of this permit constitutes grounds for revocation and enforcement action by the Department. *[62-620.610(2), F.A.C.]*
3. As provided in subsection 403.087(7), F.S., the issuance of this permit does not convey any vested rights or any exclusive privileges. Neither does it authorize any injury to public or private property or any invasion of personal rights, nor authorize any infringements of federal, state, or local laws or regulations. This permit is not a waiver of or approval of any other Department permit or authorization that may be required for other aspects of the total project which are not addressed in this permit. *[62-620.610(3), F.A.C.]*
4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgment of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the State. Only the Trustees of the Internal Improvement Trust Fund may express State opinion as to title. *[62-620.610(4), F.A.C.]*
5. This permit does not relieve the permittee from liability and penalties for harm or injury to human health or welfare, animal or plant life, or property caused by the construction or operation of this permitted source; nor does it allow the permittee to cause pollution in contravention of Florida Statutes and Department rules, unless specifically authorized by an order from the Department. The permittee shall take all reasonable steps to minimize or prevent any discharge, reuse of reclaimed water, or residuals use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment. It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit. *[62-620.610(5), F.A.C.]*
6. If the permittee wishes to continue an activity regulated by this permit after its expiration date, the permittee shall apply for and obtain a new permit. *[62-620.610(6), F.A.C.]*
7. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control, and related appurtenances, that are installed and used by the permittee to achieve compliance with the conditions of this permit. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to maintain or achieve compliance with the conditions of the permit. *[62-620.610(7), F.A.C.]*
8. This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit revision, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition. *[62-620.610(8), F.A.C.]*
9. The permittee, by accepting this permit, specifically agrees to allow authorized Department personnel, including an authorized representative of the Department and authorized EPA personnel, when applicable, upon presentation of credentials or other documents as may be required by law, and at reasonable times, depending upon the nature of the concern being investigated, to
 - a. Enter upon the permittee's premises where a regulated facility, system, or activity is located or conducted, or where records shall be kept under the conditions of this permit;

PERMITTEE: Florida Crushed Stone Company PERMIT NUMBER: FL0031895-003-IW3S
FACILITY: Center Hill Mine

- b. Have access to and copy any records that shall be kept under the conditions of this permit;
 - c. Inspect the facilities, equipment, practices, or operations regulated or required under this permit; and
 - d. Sample or monitor any substances or parameters at any location necessary to assure compliance with this permit or Department rules. *[62-620.610(9), F.A.C.]*
10. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data, and other information relating to the construction or operation of this permitted source which are submitted to the Department may be used by the Department as evidence in any enforcement case involving the permitted source arising under the Florida Statutes or Department rules, except as such use is proscribed by Section 403.111, Florida Statutes, or Rule 62-620.302, F.A.C. Such evidence shall only be used to the extent that it is consistent with the Florida Rules of Civil Procedure and applicable evidentiary rules. *[62-620.610(10), F.A.C.]*
 11. When requested by the Department, the permittee shall within a reasonable time provide any information required by law which is needed to determine whether there is cause for revising, revoking and reissuing, or terminating this permit, or to determine compliance with the permit. The permittee shall also provide to the Department upon request copies of records required by this permit to be kept. If the permittee becomes aware of relevant facts that were not submitted or were incorrect in the permit application or in any report to the Department, such facts or information shall be promptly submitted or corrections promptly reported to the Department. *[62-620.610(11), F.A.C.]*
 12. Unless specifically stated otherwise in Department rules, the permittee, in accepting this permit, agrees to comply with changes in Department rules and Florida Statutes after a reasonable time for compliance; provided however, the permittee does not waive any other rights granted by Florida Statutes or Department rules. A reasonable time for compliance with a new or amended surface water quality standard, other than those standards addressed in Rule 62-302.500, F.A.C., shall include a reasonable time to obtain or be denied a mixing zone for the new or amended standard. *[62-620.610(12), F.A.C.]*
 13. The permittee, in accepting this permit, agrees to pay the applicable regulatory program and surveillance fee in accordance with Rule 62-4.052, F.A.C. *[62-620.610(13), F.A.C.]*
 14. This permit is transferable only upon Department approval in accordance with Rule 62-620.340, F.A.C. The permittee shall be liable for any noncompliance of the permitted activity until the Department approves the transfer. *[62-620.610(14), F.A.C.]*
 15. The permittee shall give the Department written notice at least 60 days before inactivation or abandonment of a wastewater facility and shall specify what steps will be taken to safeguard public health and safety during and following inactivation or abandonment. *[62-620.610(15), F.A.C.]*
 16. The permittee shall apply for a revision to the Department permit in accordance with Rule 62-620.300, F.A.C., and the Department of Environmental Protection Guide to Wastewater Permitting at least 90 days before construction of any planned substantial modifications to the permitted facility is to commence or with Rule 62-620.325(2), F.A.C., for minor modifications to the permitted facility. A revised permit shall be obtained before construction begins except as provided in Rule 62-620.300, F.A.C. *[62-620.610(16), F.A.C.]*
 17. The permittee shall give advance notice to the Department of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements. The permittee shall be responsible for any and all damages which may result from the changes and may be subject to enforcement action by the Department for penalties or revocation of this permit. The notice shall include the following information:
 - a. A description of the anticipated noncompliance;
 - b. The period of the anticipated noncompliance, including dates and times; and
 - c. Steps being taken to prevent future occurrence of the noncompliance. *[62-620.610(17), F.A.C.]*
 18. Sampling and monitoring data shall be collected and analyzed in accordance with Rule 62-4.246, Chapters 62-160 and 62-601, F.A.C., and 40 CFR 136, as appropriate.

- a. Monitoring results shall be reported at the intervals specified elsewhere in this permit and shall be reported on a Discharge Monitoring Report (DMR), DEP Form 62-620.910(10), or as specified elsewhere in the permit.
 - b. If the permittee monitors any contaminate more frequently than required by the permit, using Department approved test procedures, the results of this monitoring shall be included in the calculation and reporting of the data submitted in the DMR.
 - c. Calculations for all limitations which require averaging of measurements shall use an arithmetic mean unless otherwise specified in this permit.
 - d. Except as specifically provided in Rule 62-160.300, F.A.C., any laboratory test required by this permit shall be performed by a laboratory that has been certified by the Department of Health Environmental Laboratory Certification Program (DOH ELCP). Such certification shall be for the matrix, test method and analyte(s) being measured to comply with this permit. For domestic wastewater facilities, testing for parameters listed in Rule 62-160.300(4), F.A.C., shall be conducted under the direction of a certified operator.
 - e. Field activities including on-site tests and sample collection shall follow the applicable standard operating procedures described in DEP-SOP-001/01 adopted by reference in Chapter 62-160, F.A.C.
 - f. Alternate field procedures and laboratory methods may be used where they have been approved in accordance with Rules 62-160.220 and 62-160.330, F.A.C. [62-620.610(18), F.A.C.]
19. Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule detailed elsewhere in this permit shall be submitted no later than 14 days following each schedule date. [62-620.610(19), F.A.C.]
20. The permittee shall report to the Department's Southwest District Office any noncompliance which may endanger health or the environment. Any information shall be provided orally within 24 hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within five days of the time the permittee becomes aware of the circumstances. The written submission shall contain: a description of the noncompliance and its cause; the period of noncompliance including exact dates and time, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent recurrence of the noncompliance.
- a. The following shall be included as information which must be reported within 24 hours under this condition:
 - (1) Any unanticipated bypass which causes any reclaimed water or effluent to exceed any permit limitation or results in an unpermitted discharge,
 - (2) Any upset which causes any reclaimed water or the effluent to exceed any limitation in the permit,
 - (3) Violation of a maximum daily discharge limitation for any of the pollutants specifically listed in the permit for such notice, and
 - (4) Any unauthorized discharge to surface or ground waters.
 - b. Oral reports as required by this subsection shall be provided as follows:
 - (1) For unauthorized releases or spills of untreated or treated wastewater reported pursuant to subparagraph a.(4) that are in excess of 1,000 gallons per incident, or where information indicates that public health or the environment will be endangered, oral reports shall be provided to the Department by calling the STATE WARNING POINT TOLL FREE NUMBER (800) 320-0519, as soon as practical, but no later than 24 hours from the time the permittee becomes aware of the discharge. The permittee, to the extent known, shall provide the following information to the State Warning Point.
 - (a) Name, address, and telephone number of person reporting;
 - (b) Name, address, and telephone number of permittee or responsible person for the discharge;
 - (c) Date and time of the discharge and status of discharge (ongoing or ceased);
 - (d) Characteristics of the wastewater spilled or released (untreated or treated, industrial or domestic wastewater);
 - (e) Estimated amount of the discharge;
 - (f) Location or address of the discharge;
 - (g) Source and cause of the discharge;
 - (h) Whether the discharge was contained on-site, and cleanup actions taken to date;
 - (i) Description of area affected by the discharge, including name of water body affected, if any; and
 - (j) Other persons or agencies contacted.

PERMITTEE: Florida Crushed Stone Company PERMIT NUMBER: FL0031895-003-IW3S
FACILITY: Center Hill Mine

- (2) Oral reports, not otherwise required to be provided pursuant to subparagraph b.(1) above, shall be provided to Department's Southwest District Office within 24 hours from the time the permittee becomes aware of the circumstances.
 - c. If the oral report has been received within 24 hours, the noncompliance has been corrected, and the noncompliance did not endanger health or the environment, the Department's Southwest District Office shall waive the written report. *[62-620.610(20), F.A.C.]*
21. The permittee shall report all instances of noncompliance not reported under Conditions VIII.17., 18. and 19. of this permit at the time monitoring reports are submitted. This report shall contain the same information required by Condition VIII.20. of this permit. *[62-620.610(21), F.A.C.]*
22. Bypass Provisions.
 - a. Bypass is prohibited, and the Department may take enforcement action against a permittee for bypass, unless the permittee affirmatively demonstrates that:
 - (1) Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage; and
 - (2) There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventative maintenance; and
 - (3) The permittee submitted notices as required under Condition VIII.22.b. of this permit.
 - b. If the permittee knows in advance of the need for a bypass, it shall submit prior notice to the Department, if possible at least 10 days before the date of the bypass. The permittee shall submit notice of an unanticipated bypass within 24 hours of learning about the bypass as required in Condition VIII.20. of this permit. A notice shall include a description of the bypass and its cause; the period of the bypass, including exact dates and times; if the bypass has not been corrected, the anticipated time it is expected to continue; and the steps taken or planned to reduce, eliminate, and prevent recurrence of the bypass.
 - c. The Department shall approve an anticipated bypass, after considering its adverse effect, if the permittee demonstrates that it will meet the three conditions listed in Condition VIII.22 a.(1) through (3) of this permit.
 - d. A permittee may allow any bypass to occur which does not cause reclaimed water or effluent limitations to be exceeded if it is for essential maintenance to assure efficient operation. These bypasses are not subject to the provision of Condition VIII.22.a. through c. of this permit. *[62-620 610(22), F.A.C.]*
23. Upset Provisions
 - a. A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed contemporaneous operating logs, or other relevant evidence that:
 - (1) An upset occurred and that the permittee can identify the cause(s) of the upset;
 - (2) The permitted facility was at the time being properly operated;
 - (3) The permittee submitted notice of the upset as required in Condition VIII.20. of this permit; and
 - (4) The permittee complied with any remedial measures required under Condition VIII 5. of this permit.

PERMITTEE: Florida Crushed Stone Company PERMIT NUMBER: FL0031895-003-IW3S
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- b. In any enforcement proceeding, the burden of proof for establishing the occurrence of an upset rests with the permittee.
- c. Before an enforcement proceeding is instituted, no representation made during the Department review of a claim that noncompliance was caused by an upset is final agency action subject to judicial review.
[62-620.610(23), F.A.C.]

Executed in Hillsborough County, Florida.

STATE OF FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION



Jeffrey S. Greenwell, P.E.
Water Facilities Administrator
Southwest District

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Florida Crushed Stone Company PERMIT NUMBER: FL0031895-003-1W33 Version: 2/2007

MAILING ADDRESS: P.O. Box 147
Center Hill, FL 33514 LIMIT CLASS SIZE: Final Minor REPORT GROUP: Monthly Industrial

FACILITY LOCATION: Center Hill Mine
530 Kings Highway (Highway 48 West)
Center Hill, FL 33514 MONITORING GROUP NUMBER: D-001 MONITORING GROUP DESC: D-001

COUNTY: Sumter NO DISCHARGE FROM SITE: MONITORING PERIOD: From: _____ To: _____

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
Flow	Sample Measurement						
PARM Code 50050 1	Permit Requirement (Mo Avg)	MGD				Continuous	Recorder
Flow	Sample Measurement						
PARM Code 50050 P	Permit Requirement (Day.Max)	MGD				Continuous	Recorder
Turbidity (effluent)	Sample Measurement						
PARM Code 00070 1	Permit Requirement		Report (Day.Max.)	NTU		Monthly, When Discharging	Grab
Turbidity (back&ground)	Sample Measurement						
PARM Code 00070 5	Permit Requirement		Report (Day.Max.)	NTU		Monthly, When Discharging	Grab
Turbidity (calculated limit)	Sample Measurement						
PARM Code 00070 P	Permit Requirement		Report (Day.Max.)	NTU		Monthly, When Discharging	Calculated
Turbidity (effluent minus calculated limit)	Sample Measurement						
PARM Code 00070 Q	Permit Requirement		0.00 (Day.Max.)	NTU		Monthly, When Discharging	Calculated

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT - PART A (Continued)

FACILITY Center Hill Mine

MONITORING GROUP NUMBER: D-001
MONITORING PERIOD From: _____ To _____

PERMIT NUMBER: FL0031895

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	Frequency of Analysis	No. Ex.	Sample Type
Oil and Grease	Sample Measurement						
PARM Code 00556 1 Mon. Site No. EFF-1	Permit Requirement		5.0 (Day Max.)	MG/L	Monthly, When Discharging		Grab
Temperature (F), Water	Sample Measurement						
PARM Code 00011 1 Mon. Site No. EFF-1	Permit Requirement		Report (Day Max.)	DEG.F	Monthly, When Discharging		Grab
pH	Sample Measurement						
PARM Code 00400 1 Mon. Site No. EFF-1	Permit Requirement		6.0 (Day Min.)	SU	Monthly, When Discharging		Grab
Dissolved Oxygen	Sample Measurement						
PARM Code 00300 1 Mon. Site No. EFF-1	Permit Requirement		5.0 (Day Min.)	MG/L	Monthly, When Discharging		Grab
Specific Conductance	Sample Measurement						
PARM Code 00095 1 Mon. Site No. EFF-1	Permit Requirement		1275 (Day Max.)	UMHOS/CM	Monthly, When Discharging		Grab
	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						
	Sample Measurement						
	Permit Requirement						

DEPARTMENT OF ENVIRONMENTAL PROTECTION DISCHARGE MONITORING REPORT - PART A

When Completed mail this report to: Department of Environmental Protection, Wastewater Compliance Evaluation Section, MS 3551, 2600 Blair Stone Road, Tallahassee, FL 32399-2400

PERMITTEE NAME: Florida Crushed Stone Company
 MAILING ADDRESS: P O Box 147
 Center Hill, FL 33514
 PERMIT NUMBER: FL0031895-003-1W35
 Version: 2/2007
 FACILITY: Center Hill Mine
 LOCATION: 530 Kings Highway (Highway 48 West)
 Center Hill, FL 33514
 LIMIT CLASS SIZE: Final Minor
 REPORT GROUP: Toxicity Industrial
 MONITORING GROUP NUMBER: D-001
 MONITORING GROUP DESC: D-001

COUNTY: Sumter
 NO DISCHARGE FROM From: _____ To: _____
 SITE: _____
 MONITORING PERIOD: _____

Parameter	Quantity or Loading	Units	Quality or Concentration	Units	No. Ex.	Frequency of Analysis	Sample Type
LC50 STATRE 96HOUR ACUTE Ceriodaphnia dubia(Routine) PARM Code TAN3B P Mon. Site No. EFF-1	Sample Measurement Permit Requirement		100 (Min.)	PER- CENT		Bi-monthly When Discharging	1 grab/ 24 hour
LC50 STATRE 96HOUR ACUTE Ceriodaphnia dubia(Additional) PARM Code TAN3B Q Mon. Site No. EFF-1	Sample Measurement Permit Requirement		100 (Min.)	PER- CENT		As Needed	As required by the permit
LC50 STATRE 96HOUR ACUTE Cyprinella leedsii(Routine) PARM Code TAN6H P Mon. Site No. EFF-1	Sample Measurement Permit Requirement		100 (Min.)	PER- CENT		Bi-monthly When Discharging	1 grab/ 24 hour
LC50 STATRE 96HOUR ACUTE Cyprinella leedsii(Additional) PARM Code TAN6H Q Mon. Site No. EFF-1	Sample Measurement Permit Requirement		100 (Min.)	PER- CENT		As Needed	As required by the permit
	Sample Measurement Permit Requirement						
	Sample Measurement Permit Requirement						

*IF A SECOND DEFINITIVE TEST IS REQUIRED, ENTER THE RESULT IN AN EMPTY ROW.
 **ENTER NOD-1 C IN THE RESULTS COLUMN IF NO DISCHARGE OCCURRED DURING THIS REPORTING PERIOD.
 ENTER NOD-9 IN THE RESULTS COLUMN IF NO DEFINITIVE TESTS ARE REQUIRED.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE NO	DATE (YY/MM/DD)
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COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT

Read these instructions as well as the SUPPLEMENTAL INSTRUCTIONS FOR COMPLETING THE WASTEWATER DISCHARGE MONITORING REPORT before completing the DMR. Hard copies and/or electronic copies of the required parts of the DMR were provided with the permit. All required information shall be completed in full and typed or printed in ink. A signed, original DMR shall be mailed to the address printed on the DMR by the 28th of the month following the monitoring period. The DMR shall not be submitted before the end of the monitoring period.

The DMR consists of three parts--A, B, and D--all of which may or may not be applicable to every facility. Facilities may have one or more Part A's for reporting effluent or reclaimed water data. All domestic wastewater facilities will have a Part B for reporting daily sample results. Part D is used for reporting ground water monitoring well data. When results are not available, the following codes should be used on parts A and D of the DMR and an explanation provided where appropriate. Note: Codes used on Part B for raw data are different.

CODE	DESCRIPTION/INSTRUCTIONS	CODE	DESCRIPTION/INSTRUCTIONS
ANC	Analysis not conducted.	NOD	No discharge from/to site.
DRY	Dry Well	OPS	Operations were shutdown so no sample could be taken.
FLD	Flood disaster.	OTH	Other. Please enter an explanation of why monitoring data were not available.
IFS	Insufficient flow for sampling.	SEF	Sampling equipment failure.
LS	Lost sample		
MNR	Monitoring not required this period.		

When reporting analytical results that fall below a laboratory's reported method detection limits or practical quantification limits, the following instructions should be used.

1. Results greater than or equal to the PQL shall be reported as the measured quantity.
2. Results less than the PQL and greater than or equal to the MDL shall be reported as the laboratory's MDL value. These values shall be deemed equal to the MDL when necessary to calculate an average for that parameter and when determining compliance with permit limits.
3. Results less than the MDL shall be reported by entering a less than sign (" $<$ ") followed by the laboratory's MDL value, e.g. <0.001 . A value of one-half the MDL or one-half the effluent limit, whichever is lower, shall be used for that sample when necessary to calculate an average for that parameter. Values less than the MDL are considered to demonstrate compliance with an effluent limitation.

PART A - DISCHARGE MONITORING REPORT (DMR)

Part A of the DMR is comprised of one or more sections, each having its own header information. Facility information is preprinted in the header as well as the monitoring group number, whether the limits and monitoring requirements are interim or final, and the required submittal frequency (e.g. monthly, annually, quarterly, etc.). Submit Part A based on the required reporting frequency in the header and the instructions shown in the permit. The following should be completed by the permittee or authorized representative:

- No Discharge From Site:** Check this box if no discharge occurs and, as a result, there are no data or codes to be entered for all of the parameters on the DMR for the entire monitoring group number, however, if the monitoring group includes other monitoring locations (e.g., influent sampling), the "NOD" code should be used to individually denote those parameters for which there was no discharge.
- Monitoring Period:** Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
- Sample Measurement:** Before filling in sample measurements in the table, check to see that the data collected correspond to the limit indicated on the DMR (i.e. interim or final) and that the data correspond to the monitoring group number in the header. Enter the data or calculated results for each parameter on this row in the non-shaded area above the limit. Be sure the result being entered corresponds to the appropriate statistical base code (e.g. annual average, monthly average, single sample maximum, etc.) and units.
- No. Ex.:** Enter the number of sample measurements during the monitoring period that exceeded the permit limit for each parameter in the non-shaded area. If none, enter zero.
- Frequency of Analysis:** The shaded areas in this column contain the minimum number of times the measurement is required to be made according to the permit. Enter the actual number of times the measurement was made in the space above the shaded area.
- Sample Type:** The shaded areas in this column explain the type of sample (e.g. grab, composite, continuous) required by the permit. Enter the actual sample type that was taken in the space above the shaded area.
- Signature:** This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event (here are questions concerning this report. Enter the date when the report is signed).
- Comment and Explanation of Any Violations:** Use this area to explain any exceedances, any upset or by-pass events, or other items which require explanation. If more space is needed, reference all attachments in this area.

PART B - DAILY SAMPLE RESULTS

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed.
Daily Monitoring Results: Transfer all analytical data from your facility's laboratory or a contract laboratory's data sheets for all day(s) that samples were collected. Record the data in the units indicated. Table 1 in Chapter 62-160, F.A.C., contains a complete list of all the data qualifier codes that your laboratory may use when reporting analytical results. However, when transferring numerical results onto Part B of the DMR, only the following data qualifier codes should be used and an explanation provided where appropriate.

CODE	DESCRIPTION/INSTRUCTIONS
S	The compound was analyzed for but not detected.
A	Value reported is the mean (average) of two or more determinations.
J	Estimated value, value not accurate.
Q	Sample held beyond the actual holding time.
Y	Laboratory analysis was from an unpreserved or improperly preserved sample

Add the results to get the Total and divide by the number of days in the month to get the Monthly Average

Plant Staffing: List the name, certificate number, and class of all state certified operators operating the facility during the monitoring period. Use additional sheets as necessary.

PART D - GROUND WATER MONITORING REPORT

Monitoring Period: Enter the month, day, and year for the first and last day of the monitoring period (i.e. the month, the quarter, the year, etc.) during which the data on this report were collected and analyzed
Date Sample Obtained: Enter the date the sample was taken. Also, check whether or not the well was purged before sampling.

Time Sample Obtained: Enter the time the sample was taken.

Sample Measurement: Record the results of the analysis. If the result was below the minimum detection limit, indicate that.

Detection Limits: Record the detection limits of the analytical methods used.

Analysis Method: Indicate the analytical method used. Record the method number from Chapter 62-160 or Chapter 62-601, F.A.C., or from other sources

Sampling Equipment Used: Indicate the procedure used to collect the sample (e.g. arioff, bucket/bailer, centrifugal pump, etc.)

Samples Filtered: Indicate whether the sample obtained was filtered by laboratory (L), filtered in field (F), or unfiltered (N).

Signature: This report must be signed in accordance with Rule 62-620.305, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached in the event there are questions concerning this report. Enter the date when the report is signed.

Comments and Explanations: Use this space to make any comments on or explanations of results that are unexpected. If more space is needed, reference all attachments in this area.

SPECIAL INSTRUCTIONS FOR LIMITED WET WEATHER DISCHARGES

Flow (Limited Wet Weather Discharge): Enter the measured average flow rate during the period of discharge or divide gallons discharged by duration of discharge (converted into days). Record in million gallons per day (MGD).

Flow (Upstream): Enter the average flow rate in the receiving stream upstream from the point of discharge for the period of discharge. The average flow rate can be calculated based on two measurements, one made at the start and one made at the end of the discharge period. Measurements are to be made at the upstream gauging station described in the permit.

Actual Stream Dilution Ratio: To calculate the Actual Stream Dilution Ratio, divide the average upstream flow rate by the average discharge flow rate. Enter the Actual Stream Dilution Ratio accurate to the nearest 0.1.

No. of Days the SDF > Stream Dilution Ratio: For each day of discharge, compare the minimum Stream Dilution Factor (SDF) from the permit to the calculated Stream Dilution Ratio. On Part B of the DMR, enter an asterisk (*) if the SDF is greater than the Stream Dilution Ratio on any day of discharge. On Part A of the DMR, add up the days with an "*" and record the total number of days the Stream Dilution Factor was greater than the Stream Dilution Ratio.

CBOD: Enter the average CBOD, of the reclaimed water discharged during the period shown in duration of discharge.

TKN: Enter the average TKN of the reclaimed water discharged during the period shown in duration of discharge.

Actual Rainfall: Enter the actual rainfall for each day on Part B. Enter the actual cumulative rainfall to date for this calendar year and the actual total monthly rainfall to date for this calendar year is the total amount of rain, in inches, that has been recorded since January 1 of the current year through the month for which this DMR contains data.

Rainfall During Average Rainfall Year: On Part A, enter the total monthly rainfall during the average rainfall year and the cumulative rainfall for the average rainfall year is the amount of rain, in inches, which fell during the average rainfall year from January through the month for which this DMR contains data.

No. of Days L.WWD Activated During Calendar Year: Enter the cumulative number of days that the limited wet weather discharge was activated since January 1 of the current year.

Reasons for Discharge: Attach to the DMR a brief explanation of the factors contributing to the need to activate the limited wet weather discharge.

Jumper Creek, Class III Fresh Waters.
 Latitude: 28° 40' 4.3"
 Longitude: 82° 00' 42.4"

BASIS FOR EFFLUENT LIMITS AND MONITORING REQUIREMENTS:

Outfall D-001

Parameter		Basis for Limit/Monitoring Requirement	
Temperature (F), Water (DEG.F)	DEG.F	Maximum	BPJ
Specific Conductance (umhos/cm)	(umhos/cm)	Maximum	62-302.530, F.A.C.
Dissolved Oxygen	MG/L	Minimum	62-302.530, F.A.C.
Turbidity (NTU)	NTU	Minimum	BPJ
Turbidity (Background) (NTU)	NTU	Monthly Average	BPJ
Turbidity (NTU)	NTU	Monthly Average	BPJ
Turbidity (Background) (NTU)	NTU	Maximum	BPJ
pH (SU)	SU	Maximum	62-302.530 F.A.C.
		Minimum	62-302.530 F.A.C.
Oil and Grease (MG/L)	MG/L	Daily Minimum	62-302.530 F.A.C.
		Monthly Average	
Flow (MGD)	MGD	Monthly Average	62-620 F.A.C.
		Daily Minimum	62-620 F.A.C.
		Daily Maximum	62-620 F.A.C.

The following were used as the basis of the permit limitations/conditions:

A. FAC refers to various portions of the Florida Administrative Code.

The effective dates of FAC Rule Chapters cited in the permit and in this document are as follows:

Chapter	Effective Date
62-4	05-01-03
62-302	05-15-02
62-520	12-09-96
62-522	08-27-01
62-550	05-28-03
62-620	08-25-03
62-650	12-26-96
62-660	10-01-98

B. FS refers to various portions of the Florida Statutes

C. CFR refers to various portions of the Code of Federal Regulations, Title 40

D. BPJ refers to Best Professional Judgment

E. CWA refers to the Clean Water Act

Specific Conductance and *Dissolved Oxygen* have been added to the proposed Effluent limitations and Monitoring Requirements due to the discharge from the facility combines groundwater generated during mining activities with the proposed truck wash water.

The facility has provided reasonable assurance that the discharge will not adversely affect the designated use of receiving water. All other available data, has been evaluated in accordance with the Department's reasonable assurance procedures to ensure that no limits other than those included in this permit are needed to maintain Florida water quality standards.

APPENDIX D

**SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
(SWFWMD)
WATER USE PERMIT 2000013.009
MINOR MODIFICATION APPLICATION**

**WATER USE PERMIT RENEWAL/MODIFICATION APPLICATION
CENTER HILL MINE
SUMTER COUNTY, FLORIDA
SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT
GENERAL WATER USE PERMIT NO. 20000213.009
for
CEMEX CONSTRUCTION MATERIALS FLORIDA, LLC**



Prepared by:

THE COLINAS GROUP, INC.
Lakeland, Florida

May 18, 2010

Project No. S-262A

THE COLINAS GROUP, INC.
ENGINEERING AND ENVIRONMENTAL CONSULTANTS

May 21, 2010

Southwest Florida Water Management District
2379 Broad Street
Brooksville, FL 34609-6899

Attention: Mr. Paul Williams

Re: Water Use Permit Renewal and Modification
Center Hill Mine
Sumter County, Florida
General Water Use Permit No. 20000213.009
for Cemex Construction Materials Florida, LLC.

Dear Mr. Williams:

The Colinas Group, Inc., is pleased to submit the attached Water Use Permit Renewal and Modification application package for the Cemex Construction Materials Florida, LLC., (Cemex) Center Hill Mine. (General Water Use Permit No. 20000213.009). The application package is to renew the existing water use permit that expires on May 24, 2010 and to modify the permit by changing the quarry layouts and Environmental Management and Monitoring Plan (EMMP).

We are proposing to eliminate Quarry A and enlarge Quarries B-1 and B-2 as a replacement for Quarry A. The reasons for proposing to eliminate the formerly proposed Quarry A are twofold. First, proposed Quarry A has a long quarry wall paralleling the Hydraulic Barrier Ditch (HBD). There is concern that the dewatering discharge placed into the HBD will "short-circuit" back to Quarry A rather than recharging into the Floridan aquifer, as planned. Second, elimination of proposed Quarry A will eliminate the need for a Quarry A key cut. Blasting effects of a key cut are more pronounced than occurs during the normal quarrying operations. Key cut blasting along a quarry wall paralleling the HBD offers some safety concerns because of the potential for causing direct water conduits from the HBD to the quarry.

Revisions are offered to the EMMP to add an off site water level monitoring location and remove monitoring stations that have not proved to provide any valuable information. Additionally, the revised EMMP offers an additional off site wetlands monitoring station. The proposed revisions:

- 1) provide additional data to continually evaluate the effectiveness of the Hydraulic Barrier Ditch to prevent off-site ground water drawdown impacts; and,
- 2) monitor the current and future drawdown created by quarry dewatering activities in Quarry B-1 and proposed Quarry B-2 and identify triggers for action to mitigate drawdown impacts, if necessary.

Southwest Florida Water Management District
May 21, 2010
Page 2

* * * *

Thank you for the opportunity to submit the WUP renewal/modification application package. We look forward to your review and comments. In the meantime, if you have any questions, please call.

Yours very truly,

THE COLINAS GROUP, INC.
ENGINEERING AND ENVIRONMENTAL CONSULTANTS



Mark R. Stephens, P.G., P.E.
Principal Consultant

two (2) copies submitted

attachments

cc: Mr. James P. Morris - Cemex Construction Materials Florida, LLC.

SOUTHWEST FLORIDA WATER MANAGEMENT DISTRICT

2379 BROAD STREET
BROOKSVILLE, FLORIDA 34604-6899
(352) 796-7211 or 1-800-423-1476 (FL only)
TDD only: 1-800-231-6103 (FL only)

GENERAL WATER USE PERMIT APPLICATION

The General Water Use Permit Application is to be completed by all applicants for requested withdrawals of ground water or surface water including Alternative Water Supplies that meet the following criteria:

- Withdrawals are required to meet a combined annual average daily water demand that equals or exceeds 100,000 gallons per day (gpd) but is less than 500,000 gpd; or
Withdrawals are required to meet a combined annual average daily water demand less than 100,000 gpd under the following circumstances:
- Drought annual average demand is 100,000 gpd or more in the Southern Water Use Caution Area.
- The primary withdrawal is from a surface water source for an annual average demand of 50,000 gpd or greater.
- The maximum daily demand quantities are greater than or equal to 3,000,000 gpd for crop protection or other use, except in the Plant City-Dover area where the maximum daily demand quantities are greater than or equal to 1,000,000 gpd.
- Withdrawals are required by the permit to be metered and withdrawal quantities reported to the District.

A pre-application checklist is available to assist the applicant in completing this form.

IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OR PAGE COPIES REFERRING TO THE PAGE NUMBER AND FORM ENTRY. PROVIDE DOCUMENTATION AND REFERENCES WHERE APPROPRIATE. COMPLETE ALL APPROPRIATE SUPPLEMENTAL FORMS INDICATED IN PART V. THIS INFORMATION IS REQUESTED PURSUANT TO CHAPTER 373, FLORIDA STATUTES, AND RULES 40D-2.019, 40D-2.101 AND 40D-2.301, FLORIDA ADMINISTRATIVE CODE.

PART I. ADMINSTRATIVE

APPLICATION TYPE (check one): [] New
[] Renewal (Permit number: 20000213.009)
[] Modification (Permit number: 20000213.009)
[] Expired (Previous permit number:)

PERMIT TERM: If this is an application for a new permit or for renewal of an existing permit, please check the permit term requested. (Application for modification typically defers to existing permit term.)

[x] 10 years [] years

If a permit term greater than 10 years is requested, attach an explanation for the need. [] Attached.

Project name: Center Hill Mine

APPLICANT: All owners of the property to be included on this permit must be listed as applicants. The permit will be issued in the names of all persons or entities listed on the deed for the property. If there are multiple landowners, provide each applicant's information on blank copies of this page. Lessees on the property, who are included as an applicant, must also be listed and identified as a lessee.

Name: Cemex Construction Materials Florida, LLC. Telephone: (352) 796-3522

Address: 11430 Camp Mine Road Cell phone: (352) 303-3563

City, State, ZIP: Brooksville, FL 34601

E-mail address: jpmorris@cemexusa.com

[] Attachment for more applicants

General Water Use Permit Application

CONSULTANT: This is the person who may be employed by the applicant to complete this application on the applicant's behalf. If there is a consultant the District should contact regarding this application, provide the contact information below. A copy of all correspondence with the applicant will be copied to the consultant until such time as the permit is issued. An applicant can have both a consultant and a contact, and they can be the same or different persons.

Name: Mark R. Stephens, P.G., P.E. Telephone: (863) 669-9141
Company: The Colinas Group, Inc. Cell phone: (863) 670-1189
Address: 2031 E. Edgewood Drive, Suite 5
City, State, ZIP: Lakeland, FL 33803
E-mail address: stephensmr@cs.com

There is no consultant

CONTACT: This is a person who may be employed by the applicant to handle all correspondence including compliance correspondence on the applicant's behalf after the permit is issued. Contacts may be farm/grove managers, golf course superintendents, etc. All correspondence with the contact will be copied to the permittees.

Name: James P. Morris Telephone: (352) 796-3522
Company: Cemex Construction Materials Florida, LLC. Cell phone: (352) 303-3563
Address: 11430 Camp Mine Road
City, State, ZIP: Brooksville, FL 34601
E-mail address: jpmorris@cemexusa.com

There is no contact other than the applicant

PART II. PROPERTY

OWNERSHIP OR LEGAL CONTROL

- The property to be included in this application is owned by the applicants.
 Applicant has other legal control (an application made by a lessee on leased property must be a joint application in the name of the lessee and the owners, or be only in the name of the owners).

NEW AND RENEWAL APPLICATIONS: Provide documentation of ownership or other legal control (control that is other than direct ownership).

Attached

LEASED PROPERTY: If lessee is a co-applicant, provide a copy of either (check document type and attach):

- Lease Letter signed by owner describing lease arrangement and duration Not applicable

NOTE: Permits will not be issued for duration longer than the lease when a lessee is a co-applicant, unless the lease is renewable. If renewable, the applicants may be required to provide a copy of the renewed lease at the appropriate time. All owners and the lessee must sign this application.

ACREAGE: Owned/Controlled: +/-994.9 Leased:* NA Serviced:** NA

- * *Leased – Land leased by the applicant on which there is to be water used by the permittee.*
** *Serviced – Land owned by another party, not leased by this applicant, and not included in any water use permit for which this applicant proposes to provide water for the other party's use. Provide a copy of the service agreement.*

Attached

PART III. MAP

LOCATION MAP

Note to public supply applicants: Also see the service area map requirements in the supplemental form for Public Supply.

Provide a recent aerial map showing:

- North arrow
- Scale designation; all maps should have a minimum scale of 1" = 2,000'
- Landmarks such as roads and political boundaries
- Applicant property boundary
- Ponds, lakes, streams, canals, rivers or any surface water body that is to be used as a water source. If a surface water source is to be constructed, outline its proposed footprint on the map.
- Recirculation or settling ponds, discharge points labeled for reference
- Interconnected withdrawal points such as augmentation repump systems
- All on-site wetlands
- Withdrawal point locations, including standby, rotational, or repump withdrawals. Show locations of all capped and plugged wells. Label each withdrawal point with the District ID number or Owner ID number.
- Locations of above ground or in-ground storage facilities, if any, for the offsite water sources
- Location of monitor wells and surface monitors (staff gauges, weirs, etc.) that are associated with this application, if any, labeled with the District ID number or Owner ID number
- Land parcels serviced or leased for which water from this project will be provided
- If this application includes noncontiguous owned or leased parcels, or if the parcels to be serviced are a distance from the withdrawal point locations, provide separate large-scale maps (enlarged areas) of each parcel in addition to a smaller-scale map (broader area) that includes all parcels.

PART IV. RELATED PERMITS

SURFACE WATER MANAGEMENT

Does the applicant have or has the applicant applied for any related Environmental Resource Permit (ERP), Management and Storage of Surface Water (MSSW) permit, or an Agricultural Ground and Surface Water Management (AGSWM) exemption for this project?

Yes No

If "yes," check which applies and provide the permit number:

ERP/MSSW number: ERP 0211510-006

AGSWM exemption number: _____

If "no," or if the existing ERP/MSSW or AGSWM does not include your proposed activity, do you intend to:

1. Change the existing surface water drainage on or from the property?
 Yes No
2. Add to the pollutant load from the property?
 Yes No
3. Put non-farmed or long-fallow land into crop?
 Yes No
4. Make a change in crop type and/or irrigation method?
 Yes No
5. Change the major water use type? (e.g., from agriculture to recreation/aesthetic)
 Yes No

General Water Use Permit Application

If you answered "no" to questions 1 through 5 above, it is likely you will not have to demonstrate that an ERP or AGSWM exemption is needed; however, be advised that District staff's evaluation of this application in detail may indicate otherwise.

If you answered "yes" to any questions 1 through 5 above, you may need an ERP or an AGSWM exemption. For assistance, contact the Environmental Resource Permitting section at the District service office that administers water use permits in your area. Application for an ERP must be completed before a water use permit will be issued. If your agricultural operation qualifies for an AGSWM exemption, the evaluation must be done before a water use permit will be issued.

INTEGRATED SURFACE WATER MANAGEMENT AND WATER USE SYSTEMS

Is there an existing or proposed surface water management system that is integrated with the water use for this project (e.g., augmentation repump systems; withdrawals from detention/retention stormwater ponds, etc.)?

- Yes No (Skip to "WATER DISPOSAL".)

If "yes," on a separate attachment, describe how the system is managed in terms of regulating water levels and flows within the system. Include all withdrawal points and proposed quantities from ponds used for water quality treatment of stormwater runoff and ponds used for stormwater capture for flood prevention that are also used as water sources. Describe how the withdrawal of water from such systems for water use will not interfere with their surface water management design. Include information such as invert elevations, pond water levels, culverts connecting ponds, weirs, control structures, storage capacity (in gallons), etc. Also show locations of each on the requested map.

- Attached

WATER DISPOSAL

If water is disposed from this site, provide the information below. If water is not disposed from this site, skip to the next section.

- Yes – Water is disposed from this site
 No (Skip to PART V.)

Annual average quantity of water that is disposed offsite (include irrigation runoff): _____ gpd

Indicate the disposal method and the percentage of the total that is disposed by each method.

<i>Disposal Method</i>	<i>% of Total Disposed</i>
Spray irrigation field	_____
Percolation via retention pond	_____
Offsite discharge	_____
Other (describe below)	_____
Total:	100%

Other (description): _____

WATER DISCHARGED OFF-SITE – If water is discharged off-site, provide the following:

National Pollutant Discharge Elimination System (NPDES) number(s): _____
_____, _____, _____

Florida Department of Environmental Protection discharge permit number(s): FL0031895-003-IW3S

_____, _____. Submit an evaluation of potential opportunities for recycling/reusing this water that describes how much could be reused, where it can be reused, and how it can be reused.

- Attached See Dewatering Management Plan

PART V. SUPPLEMENTAL FORMS REQUIRED

SOUTHERN WATER USE CAUTION AREA (SWUCA) – If at least one withdrawal point is located in the SWUCA, the entire permit is considered to be in the SWUCA. If this applies, it is required to include the SWUCA supplemental form with this application. Within the SWUCA supplemental form, directions to include other forms may pertain.

USE TYPES – Check all use types that apply. Supplemental forms must be completed for all use types indicated. See the *Water Use Permit Information Manual, Part B, Basis of Review*, Chapter 3 for explanations of the use classifications.

Public Supply Recreation or Aesthetic Agriculture Industrial or Commercial

PART VI. WATER QUANTITIES AND SOURCES

TOTAL DEMAND QUANTITIES – Indicate the total quantity of water necessary to meet the applicant's water demand for the uses listed in the use type supplemental forms for the remainder of the permit term (for modifications), or the next ten years; or the requested permit term if greater than ten years (for new and renewals).

See the *Water Use Permit Information Manual, Part B, Basis of Review*, Chapter 3 for further explanation of these quantities.

Annual average daily quantity (total amount of water requested for a calendar year, divided by 365 days, in gallons per day):

251,546 gpd

Peak month daily quantity (amount of water requested during the highest water-use month in a calendar year, divided by the number of days in that month, in gallons per day):

390,760 gpd

Maximum daily quantity (maximum amount needed for any single day in gallons; appropriate if application is for crops requiring frost/freeze protection or a well field where the operation requires maximum use of any withdrawal point at any time):

NA gpd

IMPORTED WATER SOURCES – In the following table, provide information about *all* sources for water that are imported or are intended to be imported from an external entity to meet water needs for this project. If the supplier has a water use permit (WUP), provide the WUP number. Indicate the person with whom you have contact for this service.

Source type descriptions:

Alternative water supply (AWS)– Water from a nontraditional source that can be used at this site without treatment, such as reclaimed water or captured stormwater. Reclaimed water is also an AWS import that has been treated at a wastewater treatment plant.

Public water supply– Potable or non-potable water from a public supply utility.

Other water supply– Water from sources other than alternative water supply or from a public water supply utility. Examples are water discharged from a mining/dewatering or industrial/commercial site.

Not applicable (Skip to "HISTORIC USE OF IMPORTED WATER/RECLAIMED WATER/OTHER AWS.")

General Water Use Permit Application

IMPORTED WATER SOURCES

Source Type	WUP No.	Water Type Supplied		Annual Avg. (gpd)	Peak Month (gpd)
<input type="checkbox"/> Alternative water supply <input type="checkbox"/> Public water supply <input type="checkbox"/> Other water supply		<input type="checkbox"/> Discharged water <input type="checkbox"/> Ground water <input type="checkbox"/> Potable water	<input type="checkbox"/> Reclaimed water <input type="checkbox"/> Stormwater		
<input type="checkbox"/> Alternative water supply <input type="checkbox"/> Public water supply <input type="checkbox"/> Other water supply		<input type="checkbox"/> Discharged water <input type="checkbox"/> Ground water <input type="checkbox"/> Potable water	<input type="checkbox"/> Reclaimed water <input type="checkbox"/> Stormwater		
<input type="checkbox"/> Alternative water supply <input type="checkbox"/> Public water supply <input type="checkbox"/> Other water supply		<input type="checkbox"/> Discharged water <input type="checkbox"/> Ground water <input type="checkbox"/> Potable water	<input type="checkbox"/> Reclaimed water <input type="checkbox"/> Stormwater		

Supplier information – Provide information for any supplier of water to your project, including public water supply, reclaimed water and recycled water derived from another entity. Provide a copy of the contract or agreement with the supplier that shows quantities, duration of agreement, and cost per 1,000 gallons.

Name: _____ Telephone: (_____) _____

Address: _____

City, State, ZIP: _____ Contact Person: _____

Contract/agreement attached

If there are additional water suppliers, provide the same information on a separate sheet and submit a copy of each contract or agreement that shows quantities, duration of agreement, and cost per 1,000 gallons.

Attached There are no additional water suppliers

HISTORIC USE OF IMPORTED WATER/RECLAIMED WATER/OTHER AWS

If you received reclaimed water, other alternative water supply, used self-generated alternative water supply, or received water from a public supply utility (excluding potable/sanitary use) during the previous permit term or for the previous six years (whichever is greater), indicate below and attach a yearly summary of quantities delivered and used. If metered use is not available, submit documentation of how much was received (such as copies of receipts for purchases of reclaimed water). If receipts are not available because of a no-charge agreement, submit estimates from the supplier of historical yearly delivery. If there was historic use of self-generated alternative water supply for this same period and this information was quantified but not submitted to the District, also include the quantified amounts in an attachment.

Attached Not applicable (Skip to PART VII.)

If you have provided this information to the District in the past as required data submittals, contact the service office that administers your permit to request an output file for review. (Note, an output file is not available if submittal of this information was in report form rather than data that was input into the District's database.) This is recommended to verify data entries. If you review the data on file and agree to its use as is, indicate below. If you review the data on file and want to propose changes, indicate below and attach the revised data.

I have reviewed the data on file at the District and agree to its use as is.

I have reviewed the data on file at the District and propose changes.
(Attach digital file in comma-delimited format)

PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface". See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		WP-3
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	3	4
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Existing	Existing
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Mining (Scale House)	Mining (Maintenance Shop)
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1975 mm dd yy	____ / ____ / 1975 mm dd yy
Casing Diameter – Outside diameter at land surface.	4.0 inches	6.0 inches
Total Depth – Depth below land surface.	_____ ft. <input checked="" type="checkbox"/> Unknown	300 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	_____ ft. <input checked="" type="checkbox"/> Unknown	83 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	50 gpm	150 gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	4.0 inches	4.0 inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	2,000 gpd	3,000 gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	16,000 gpd	23,000 gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
	WP-5	MW-12
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	5	12
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Existing	Capped
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Mining (Fabrication Shop)	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1975 mm dd yy	____ / ____ / 1984 mm dd yy
Casing Diameter – Outside diameter at land surface.	3.0 inches	2.0 inches
Total Depth – Depth below land surface.	135 ft. <input type="checkbox"/> Unknown	40 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	_____ ft. <input checked="" type="checkbox"/> Unknown	40 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft <input type="checkbox"/> Unknown	From NA ft. To: NA ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	50 gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	2.0 inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	1,000 gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	2,000 gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

General Water Use Permit Application

PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-13
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	13	16
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Capped	Capped
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1984 mm dd yy	____ / ____ / 1984 mm dd yy
Casing Diameter – Outside diameter at land surface.	____ 2.0 ____ inches	____ 2.0 ____ inches
Total Depth – Depth below land surface.	____ 130 ____ ft. <input type="checkbox"/> Unknown	____ 40 ____ ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	____ 130 ____ ft. <input type="checkbox"/> Unknown	____ 40 ____ ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From ____ NA ____ ft. To: ____ NA ____ ft. <input type="checkbox"/> Unknown	From ____ NA ____ ft. To: ____ NA ____ ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	____ NA ____ gpm	____ NA ____ gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	____ NA ____ feet	____ NA ____ feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	____ NA ____ inches	____ NA ____ inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-17
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	17	19
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Capped	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1984 mm dd yy	____ / ____ / UNK mm dd yy
Casing Diameter – Outside diameter at land surface.	____ 2.0 ____ inches	____ 6.0 ____ inches
Total Depth – Depth below land surface.	____ 130 ____ ft. <input type="checkbox"/> Unknown	____ 128 ____ ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	____ 130 ____ ft. <input type="checkbox"/> Unknown	____ ft. <input checked="" type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From ____ NA ____ ft. To: ____ NA ____ ft <input type="checkbox"/> Unknown	From ____ NA ____ ft. To: ____ NA ____ ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	____ NA ____ gpm	____ NA ____ gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	____ NA ____ feet	____ NA ____ feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	____ NA ____ inches	____ NA ____ inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: ____ NA ____	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: ____ NA ____
Meter Serial Number – If unknown, assign a number and put into parentheses.	____ NA ____	____ NA ____
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	____ NA ____ gpd	____ NA ____ gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	____ NA ____ gpd	____ NA ____ gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	____ NA ____ gpd	____ NA ____ gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-20
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	20	21
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / UNK mm dd yy	____ / ____ / 1987 mm dd yy
Casing Diameter – Outside diameter at land surface.	6.0 inches	6.0 inches
Total Depth – Depth below land surface.	128 ft. <input type="checkbox"/> Unknown	121 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	_____ ft. <input checked="" type="checkbox"/> Unknown	121 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft <input type="checkbox"/> Unknown	From NA ft. To: NA ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-27
District ID No. -- Number assigned by District if withdrawal point is included on existing revision of this WUP	27	32
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Capped	Existing
Function -- Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Mining (Screen Tower)
Standby (Full) -- Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) -- Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well -- Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. -- As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date -- Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1990 mm dd yy	____ / ____ / 1996 mm dd yy
Casing Diameter -- Outside diameter at land surface.	____ 6.0 ____ inches	____ 4.0 ____ inches
Total Depth -- Depth below land surface.	____ 166 ____ ft. <input type="checkbox"/> Unknown	____ 100 ____ ft. <input type="checkbox"/> Unknown
Casing Depth -- Depth to which continuous casing is set from surface.	____ 55 ____ ft. <input type="checkbox"/> Unknown	____ 40 ____ ft. <input type="checkbox"/> Unknown
Liner Depth -- Depth from and depth to (feet)	From ____ NA ____ ft. To: ____ NA ____ ft. <input type="checkbox"/> Unknown	From ____ NA ____ ft. To: ____ NA ____ ft. <input type="checkbox"/> Unknown
Pump Capacity -- Gallons per minute (gpm) pump can produce.	____ NA ____ gpm	____ 40 ____ gpm
Pump Bowl Depth -- Depth to which the pump bowl/intake is set.	____ NA ____ feet	____ NA ____ feet
Mainline Diameter -- Outside diameter of the main discharge pipe from well or pump.	____ NA ____ inches	____ 4.0 ____ inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type -- Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number -- If unknown, assign a number and put into parentheses.	NA	NA
Annual Average -- Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	1,000 gpd
Peak Month -- Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	2,000 gpd
Maximum Daily -- Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
	BT-01	MW-50
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	36	50
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Capped	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Livestock Watering	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / ____ mm dd yy	____ / ____ / 1991 mm dd yy
Casing Diameter – Outside diameter at land surface.	____ 8.0 ____ inches	____ 2.0 ____ inches
Total Depth – Depth below land surface.	____ UNK ____ ft. <input type="checkbox"/> Unknown	____ 150 ____ ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	____ ft. <input checked="" type="checkbox"/> Unknown	____ 150 ____ ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From ____ NA ____ ft. To: ____ NA ____ ft. <input type="checkbox"/> Unknown	From ____ NA ____ ft. To: ____ NA ____ ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	____ NA ____ gpm	____ NA ____ gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	____ NA ____ feet	____ NA ____ feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	____ NA ____ inches	____ NA ____ inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365..	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-51
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	51	55
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Capped
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1991 mm dd yy	____ / ____ / UNK mm dd yy
Casing Diameter – Outside diameter at land surface.	2.0 inches	4.0 inches
Total Depth – Depth below land surface.	150 ft. <input type="checkbox"/> Unknown	80 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	150 ft. <input type="checkbox"/> Unknown	40 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface". See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		PZ-56
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	56	58
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Capped	Capped
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 1996 mm dd yy	____ / ____ / 1996 mm dd yy
Casing Diameter – Outside diameter at land surface.	2.0 inches	2.0 inches
Total Depth – Depth below land surface.	20 ft. <input type="checkbox"/> Unknown	20 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	20 ft. <input type="checkbox"/> Unknown	20 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft <input type="checkbox"/> Unknown	From NA ft. To: NA ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-60
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	60	61
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 2005 mm dd yy	____ / ____ / 2005 mm dd yy
Casing Diameter – Outside diameter at land surface.	4.0 inches	4.0 inches
Total Depth – Depth below land surface.	80 ft. <input type="checkbox"/> Unknown	80 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	38 ft. <input type="checkbox"/> Unknown	40 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365..	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-64
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	64	66
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / UNK mm dd yy	____ / ____ / 2005 mm dd yy
Casing Diameter – Outside diameter at land surface.	4.0 inches	4.0 inches
Total Depth – Depth below land surface.	120 ft. <input type="checkbox"/> Unknown	80 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	40 ft. <input type="checkbox"/> Unknown	40 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft <input type="checkbox"/> Unknown	From NA ft. To: NA ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-67
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	67	68
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 2005 mm dd yy	____ / ____ / 2005 mm dd yy
Casing Diameter – Outside diameter at land surface.	4.0 inches	4.0 inches
Total Depth – Depth below land surface.	80 ft. <input type="checkbox"/> Unknown	80 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	40 ft. <input type="checkbox"/> Unknown	40 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		MW-69
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	69	70
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 2006 mm dd yy	____ / ____ / 2006 mm dd yy
Casing Diameter – Outside diameter at land surface.	4.0 inches	4.0 inches
Total Depth – Depth below land surface.	107 ft. <input type="checkbox"/> Unknown	95 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	20 ft. <input type="checkbox"/> Unknown	20 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

General Water Use Permit Application

PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
	MW-71	MW-72
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	71	72
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor	Monitor
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 2006 mm dd yy	____ / ____ / 2006 mm dd yy
Casing Diameter – Outside diameter at land surface.	4.0 inches	4.0 inches
Total Depth – Depth below land surface.	107 ft. <input type="checkbox"/> Unknown	107 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	20 ft. <input type="checkbox"/> Unknown	20 ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table I for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		PZ-OS1
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	74	75
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor (Off-property)	Monitor (Off-property)
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / 2010 mm dd yy	____ / ____ / 2006 mm dd yy
Casing Diameter – Outside diameter at land surface.	2.0 inches	2.0 inches
Total Depth – Depth below land surface.	22 ft. <input type="checkbox"/> Unknown	22 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	NA ft. <input type="checkbox"/> Unknown	NA ft. <input type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft <input type="checkbox"/> Unknown	From NA ft. To: NA ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
	BG-1	BG-2
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	86	87
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor (Off-property)	Monitor (Off-property)
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / UNK mm dd yy	____ / ____ / UNK mm dd yy
Casing Diameter – Outside diameter at land surface.	6.0 inches	UNK inches
Total Depth – Depth below land surface.	206 ft. <input type="checkbox"/> Unknown	430 ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	_____ ft. <input checked="" type="checkbox"/> Unknown	_____ ft. <input checked="" type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From NA ft. To: NA ft. <input type="checkbox"/> Unknown	From NA ft. To: NA ft. <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	NA gpm	NA gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	NA feet	NA feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	NA inches	NA inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

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PART VII. WITHDRAWAL POINT INFORMATION

Groundwater Well Withdrawal Points

In the table below, list all wells on the property greater than 2 inches outside diameter to be included on this permit (make copies if necessary), whether active or inactive (capped, standby), and whether existing or proposed. Include surficial aquifer wells. Do not list wells strictly for domestic use (household, yard and minor garden), regardless of diameter. Provide owner identification number (Owner ID No.) for withdrawal points and provide information as indicated. All depths are "below land surface".

See Table 1 for additional details.

<i>Make copies of this table if there are more wells to be included on this permit.</i>	Owner ID No.	Owner ID No.
		BG-3
District ID No. – Number assigned by District if withdrawal point is included on existing revision of this WUP	88	89
Status: Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Plugged (PL) <input type="checkbox"/> Existing (EX) <input type="checkbox"/> Capped (CA)	Monitor	Monitor
Function – Reason for withdrawal. Pre-application checklist lists possible functions.	Monitor (Off-property)	Monitor (Off-property)
Standby (Full) – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Rotation Well – Well used on a rotational basis with other wells.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Well Completion Report No. – As filed by driller to District.	# _____ <input checked="" type="checkbox"/> Unknown	# _____ <input checked="" type="checkbox"/> Unknown
Construction Date – Month/year. If well is proposed, put anticipated completion date.	____ / ____ / <u>UNK</u> mm dd yy	____ / ____ / <u>UNK</u> mm dd yy
Casing Diameter – Outside diameter at land surface.	<u>6.0</u> inches	<u>6.0</u> inches
Total Depth – Depth below land surface.	<u>>300</u> ft. <input type="checkbox"/> Unknown	<u>59</u> ft. <input type="checkbox"/> Unknown
Casing Depth – Depth to which continuous casing is set from surface.	_____ ft. <input checked="" type="checkbox"/> Unknown	_____ ft. <input checked="" type="checkbox"/> Unknown
Liner Depth – Depth from and depth to (feet)	From <u>NA</u> ft. To: <u>NA</u> ft <input type="checkbox"/> Unknown	From <u>NA</u> ft. To: <u>NA</u> ft <input type="checkbox"/> Unknown
Pump Capacity – Gallons per minute (gpm) pump can produce.	<u>NA</u> gpm	<u>NA</u> gpm
Pump Bowl Depth – Depth to which the pump bowl/ intake is set.	<u>NA</u> feet	<u>NA</u> feet
Mainline Diameter – Outside diameter of the main discharge pipe from well or pump.	<u>NA</u> inches	<u>NA</u> inches
Metered	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – Indicate units if other than gallons.	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: <u>NA</u>	<input type="checkbox"/> Totalizing Flow <input type="checkbox"/> Digital <input type="checkbox"/> Hourly Units: <u>NA</u>
Meter Serial Number – If unknown, assign a number and put into parentheses.	NA	NA
Annual Average – Quantity to be routinely withdrawn in one year, divided by 365.	NA gpd	NA gpd
Peak Month – Quantity to be withdrawn during month of highest use, divided by the number of days in that month.	NA gpd	NA gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	NA gpd

General Water Use Permit Application

Describe the future use of all capped wells. If there are multiple capped wells, or wells to be capped, reference the Owner ID numbers: Capped wells (MW-12, MW-13, MW-16, MW-17, MW-27, WP-36, MW-55, PZ-56 and PZ-58) will be reserved for future water level monitoring.

List any wells (District ID number or Owner ID number) for which a caliper, video, or other geophysical log has been created, but has not been previously submitted to the District: None.

Submit a copy of the log and check the type that applies: Video Caliper Other None
 Log copy attached Describe Other: NA.

Surface Water Withdrawal Points - If there are or will be any surface water withdrawal points and the cumulative outer diameters of the intake pipes is four (4) inches or more, include them on this application. Include existing, inactive (pump and pipe assembly still exist but are not used) and proposed surface water withdrawal points. Do not include surface water pumps for which the sole purpose is to route water from one on-site surface water body to another, or to withdraw alternative water supplies. See Table 2 for additional details.

<i>Make copies and complete if there are more than two surface water withdrawal points.</i>	Owner ID No.	Owner ID No.
	WP-35	WP-89A
District ID Number (if any)	35	89
Water Body Name – Name of water body. If unnamed, name it anything other than None, No-Name or Not Specified.	South Quarry	Quarry B-1
Source Type: <input type="checkbox"/> Natural (N) <input type="checkbox"/> Created-unlined (CU) <input type="checkbox"/> Created-lined (CL)	Created-unlined	Created-unlined
Water Body Type: <input type="checkbox"/> Borrow Pit (BP) <input type="checkbox"/> Pond (P) <input type="checkbox"/> Lake (LK) <input type="checkbox"/> Reservoir (RV) <input type="checkbox"/> Canal (C) <input type="checkbox"/> Mine Pit (MP) <input type="checkbox"/> Retention Pond (RP) <input type="checkbox"/> River/Stream (RS)	Mine Pit	Mine Pit
Acreage – Put "N/A" if flowing water body	54	
Status - Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Dismantled (DS) <input type="checkbox"/> Existing (EX)	Existing	Existing
Function – Reason for withdrawal. See pre-application checklist.	Mining - Fine Grind Plant	Mining - Dewatering
Intake Diameter – Outside diameter of pipe extending into water.	<u>8.0</u> inches	<u>24.0</u> inches
Construction Date – Mo./yr. If proposed, put anticipated completion date.	<u> </u> / <u>UNK</u> mm yy	<u>10</u> / <u>07</u> mm yy
Pump Capacity – Gallons per minute (gpm) pump can produce.	<u>250</u> gpm	<u>21,600</u> gpm
Rotation (withdrawal point used on rotational basis with another withdrawal point)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby Full – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Annual Average – Quantity to be withdrawn in one year, divided by 365.		
Peak Month – Quantity to be withdrawn in a single month, divided by the number of days in that month.		
Maximum Daily – Maximum quantity to be withdrawn in any single day.		
Metered –	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Meter Type – <input type="checkbox"/> Totalizing Flow (TF) <input type="checkbox"/> Digital (D) <input type="checkbox"/> Hourly (H) Units: _____ (If other than gallons.)		Hourly
Meter Serial Number – If unknown, assign a number and put into parentheses.	(35)	(89A)
Mainline Diameter – Outside diameter of the main discharge pipe from pump.	<u>8.0</u> inches	<u>24.0</u> inches

General Water Use Permit Application

Describe the future use of all capped wells. If there are multiple capped wells, or wells to be capped, reference the Owner ID numbers: See page 8A.

List any wells (District ID number or Owner ID number) for which a caliper, video, or other geophysical log has been created, but has not been previously submitted to the District: See page 8A.

Submit a copy of the log and check the type that applies: Video Caliper Other None

Log copy attached Describe Other: See page 8A.

Surface Water Withdrawal Points - If there are or will be any surface water withdrawal points and the cumulative outer diameters of the intake pipes is four (4) inches or more, include them on this application. Include existing, inactive (pump and pipe assembly still exist but are not used) and proposed surface water withdrawal points. Do not include surface water pumps for which the sole purpose is to route water from one on-site surface water body to another, or to withdraw alternative water supplies.

See Table 2 for additional details.

<i>Make copies and complete if there are more than two surface water withdrawal points.</i>	Owner ID No.	Owner ID No.
	WP-89B	WP-33
District ID Number (if any)	89	
Water Body Name – Name of water body. If unnamed, name it anything other than None, No-Name or Not Specified.	Quarry B-1	South Quarry
Source Type: <input type="checkbox"/> Natural (N) <input type="checkbox"/> Created-unlined (CU) <input type="checkbox"/> Created-lined (CL)	Created-unlined	Created - Unlined
Water Body Type: <input type="checkbox"/> Borrow Pit (BP) <input type="checkbox"/> Pond (P) <input type="checkbox"/> Lake (LK) <input type="checkbox"/> Reservoir (RV) <input type="checkbox"/> Canal (C) <input type="checkbox"/> Mine Pit (MP) <input type="checkbox"/> Retention Pond (RP) <input type="checkbox"/> River/Stream (RS)	Mine Pit	Mine Pit
Acreage – Put "N/A" if flowing water body		
Status - Indicate <input type="checkbox"/> Proposed (PR) <input type="checkbox"/> Dismantled (DS) <input type="checkbox"/> Existing (EX)	Existing	Existing
Function – Reason for withdrawal. See pre-application checklist.	Mining - Dewatering	Augmentation
Intake Diameter – Outside diameter of pipe extending into water.	<u>18.0</u> inches	<u>2</u> inches
Construction Date – Mo./yr. If proposed, put anticipated completion date.	<u>10 / 07</u> mm yy	<u> </u> / <u> </u> mm yy
Pump Capacity – Gallons per minute (gpm) pump can produce.	<u>6,500</u> gpm	<u>50</u> gpm
Rotation (withdrawal point used on rotational basis with another withdrawal point)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby Full – Withdrawal point to be used as backup if another becomes inoperable, or if alternative water supply becomes unavailable.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Standby (Partial) – Withdrawal point to be routinely used for one use, but also on standby for another.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Annual Average – Quantity to be withdrawn in one year, divided by 365.	103,500 gpd	25,000 gpd
Peak Month – Quantity to be withdrawn in a single month, divided by the number of days in that month.	NA gpd	50,000 gpd
Maximum Daily – Maximum quantity to be withdrawn in any single day.	NA gpd	72,000 gpd
Metered –	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Meter Type – <input type="checkbox"/> Totalizing Flow (TF) <input type="checkbox"/> Digital (D) <input type="checkbox"/> Hourly (H) Units: _____ (If other than gallons.)	Hourly	NA
Meter Serial Number – If unknown, assign a number and put into parentheses.	(89B)	
Mainline Diameter – Outside diameter of the main discharge pipe from pump.	<u>18.0</u> inches	<u>2</u> inches

General Water Use Permit Application

Connected Or Related Withdrawal Points

Provide owner ID numbers for withdrawal points used in conjunction with another, such as in an augmentation-repump operation. For a standby or partial standby withdrawal point, indicate the withdrawal point supported.

Augmentation Source Owner ID No.	Associated Repump Owner ID No.	Withdrawal Point on Full Standby Owner ID No.	Withdrawal Point Supported Owner ID No.	Withdrawal Point on Partial Standby Owner ID No.	Withdrawal Point Supported Owner ID No.
NA					

List withdrawal points that are interconnected because they individually feed into a single irrigation system or water conveyance system: _____ None

List withdrawal points that are connected prior to connection into a single irrigation system or other water conveyance system (ganged). _____ None

PART VIII. ALTERNATIVE WATER SUPPLY SOURCES

“Alternative water supply” describes water that has been reclaimed after one or more public supply, municipal, industrial, commercial or agricultural uses; the downstream augmentation of water bodies with reclaimed water; storm water; or any other water supply source that is designated as non-traditional for a water supply planning region in the applicable regional water supply plan. Other alternative water supplies are: saltwater; brackish surface water or brackish ground water; surface water captured predominately during wet-weather flows; sources made available through the addition of new storage capacity for surface or ground water. Inclusion of reclaimed water and seawater in this definition does not alter the exemption from water use permitting for these sources (see the Water Use Permit Information Manual, Part B, Basis of Review, Section 1.2).

- Not applicable. Use of an alternative water supply is not anticipated during the term of this permit.
If you checked “not applicable,” attach a report on your investigation of the feasibility of using alternative water supply to reduce withdrawals from the resource. If the report states that use of an alternative water supply was found to be infeasible, the reason must be fully documented. Infeasibility can include unavailability or that it is cost prohibitive.
- Report attached
- If you received AWS or will receive AWS during the upcoming or remaining permit term, please provide the information below for the reclaimed water provider. If the provider has a water use permit (WUP), provide the WUP number. Submit a copy of the contract or agreement between you and the supplier that shows contract amounts and cost per 1,000 gallons.
 Name: NA
 Address: _____
 City/State/Zip: _____
 Telephone () _____ Email: _____ WUP No. _____
(if the supplier has one)

Contract Attached

Attach the same information for additional suppliers. Attached

General Water Use Permit Application

Inflow Facilities And Repump Withdrawal Points

Complete the table below with information on the type of alternative water supply and facilities used. In the space below "Owner ID No." show the appropriate attribute.

The inflow line of an off-site derived alternative water supply is to be listed as a withdrawal point on the permit because it is a source of water. If the alternative water supply is stored because it is to be repumped to the end use, the surface water withdrawal pump is also an alternative water supply withdrawal point and is indicated as a repump source in the table below. The withdrawal point for an on-site created alternative water supply is where the supply leaves its site of origination or storage for its end use, and is neither inflow nor repump but will be indicated as self-supplied in the table below.

Note: *If an off-site alternative water supply is delivered to a storage facility prior to use, there will be two alternative water supply withdrawal points: the in-flow line and the repump line.*

Indicate all existing and proposed alternative water supply in-flow and repump withdrawal points. Include alternative water supply type (see definition) even if a water use permit is not required for its use.

<i>Make a copy of this table if there are more than two AWS supply withdrawal points</i>		Owner ID No.	Owner ID No.
		NA	
Attribute	District ID No. – <i>If there is not yet a District ID number, give each withdrawal point an Owner ID No.</i>		
Status	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> Standby <input type="checkbox"/> Dismantled		
Function – <i>Choose from the list to the right.</i>	<input type="checkbox"/> Agriculture (general-non-irrigation) <input type="checkbox"/> Irrigation <input type="checkbox"/> Aquaculture <input type="checkbox"/> Livestock <input type="checkbox"/> Augmentation <input type="checkbox"/> Power <input type="checkbox"/> Environmental <input type="checkbox"/> Pressure Test <input type="checkbox"/> Fire Suppression <input type="checkbox"/> Recreation (general) <input type="checkbox"/> Industrial-Commercial <input type="checkbox"/> Repump)		
Alternative Water Supply Type <i>Choose from the list to the right.</i>	<input type="checkbox"/> Reclaimed water from a wastewater treatment plant <input type="checkbox"/> Captured storm water <input type="checkbox"/> Industrial waste water <input type="checkbox"/> Settling pond <input type="checkbox"/> Industrial process byproduct <input type="checkbox"/> Brackish ground water <input type="checkbox"/> Brackish surface water <input type="checkbox"/> Recycled, re-circulated or other reused process water <input type="checkbox"/> Seawater (even though a WUP is not required seawater use)		
Facility Type - Method <i>used to deliver the alternative water supply, as well as those used for delivery to the site of use. Indicate "I" for inflow and "R" for re-pump.</i>	Inflow (I) <input type="checkbox"/> Pressurized Pipe (PP) reclaimed water line from an off-site wastewater treatment facility <input type="checkbox"/> Non-pressurized pipe (NP) reclaimed water line from an off-site wastewater treatment facility Repump* (R) <input type="checkbox"/> From a lined holding pond <input type="checkbox"/> From an unlined holding pond/reservoir <input type="checkbox"/> Tank <input type="checkbox"/> Self-supplied (generated onsite)		
Pump Capacity – <i>Gallons per minute (gpm) pump can produce.</i>			
Mainline Diameter – <i>Outside diameter of pipe to facility or end use. For repump facilities, withdrawal pipe outside diameter.</i>		_____ inches	_____ inches
Metered – <i>If not metered, explain how quantities delivered/created are measured.</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Meter Type	<input type="checkbox"/> Totalizing Flow (TF) <input type="checkbox"/> Digital (D) <input type="checkbox"/> Hourly (H) <i>Indicate units if other than gallon:</i>		
Meter Owner – <i>If supplier meters in-flow line, that meter can be used to measure delivery if applicant has access. If not, another meter must be installed at the point of in-flow.</i>		<input type="checkbox"/> Applicant <input type="checkbox"/> Supplier	<input type="checkbox"/> Applicant <input type="checkbox"/> Supplier
Meter Serial Number – <i>If unknown, assign a number and put into parentheses.</i>		# _____	# _____

General Water Use Permit Application

Expected Minimum Monthly Delivery – Minimum quantity to be supplied each month, when available, as listed in contract or agreement.	_____ gallons/month	_____ gallons/month
Number of Months/Year Reliability – Number of month/year supply will most likely be available, in order to set aside standby quantities (if any).	_____ months	_____ months
Expected Annual Average – Quantity to receive or generate each year, divided by 365. If reliability is less than 12 months per year, prorate accordingly.	_____ gpd	_____ gpd
Expected Peak Month – Quantity to receive or generate during the highest month AWS output	_____ gpd	_____ gpd
Expected Maximum Daily – Highest quantity to be received on any single day	_____ gpd	_____ gpd
Date Available – First month/year of service expected or month/year existing service began.	____ / ____ mm yy	____ / ____ mm yy

* **Repump** describes a facility that withdraws from a containment (pond or lake) that is augmented by another source.

If any part of the alternative water supply claimed is storm water captured for use on-site, calculations and documentation for the amount of storm water to be counted toward alternative water supply use, per catchment, must be provided. Include documentation that the capture of this amount of stormwater runoff does not adversely impact the watershed, environment, existing legal users, and off-site land use.

- Attached Not applicable

Connected Alternative Water Supply Sites

Augmentation-Repump Relationship

Complete the table below for all alternative water supply withdrawal points related via an augmentation-repump system. Show all Owner ID numbers for augmentation sources related to a single repump source (for instance, if an alternative water supply augmentation source is put into a storage facility that also receives ground water, show both of the Owner ID numbers for augmenting reclaimed water and augmenting groundwater sources). Provide a storage facility name (Pond No. 7; East Pond, Tank B, etc.). If it is in-ground storage, indicate whether or not it is lined with water-impermeable material or unlined by adding an "L" or "UL" after the name. If there is not yet a District ID number, only indicate the Owner ID number for the withdrawal point.

Augmentation Source		Augmentation Storage Facility Name (L or UL)	Storage Volume (gallons)	Repump District ID/Owner ID No.	Additional Stormwater Runoff Annual Average Quantity*
District ID Number	Owner ID Number				
NA					

* If additional stormwater quantities are attributed to this storage facility, indicate the amount here.

Are any groundwater wells or surface water withdrawals from lakes, streams or other traditional sources planned to also augment these storage facilities?

- Yes No

If "yes," describe associations and how much is expected to be pumped into the storage facility from each:

Withdrawal Points on Standby for Alternative Water Supply

A "**full standby**" withdrawal point is not used routinely except to provide backup when another source becomes unusable or unavailable for a limited time. Its "routinely used" quantity is zero. A "**partial standby**"

General Water Use Permit Application

withdrawal point has quantities permitted for routine use **and** quantities to provide backup when another source becomes unusable or unavailable for a limited time. A quantity is required in columns C & D.

Provide the following information for any arrangement among withdrawal points on the permit where a withdrawal point is used occasionally to provide backup quantities for another source. You may make a photocopy of this page for additional standby withdrawal points.

A		B		C	D
Withdrawal Point on Standby		Withdrawal point Backed Up		Routinely Used Annual Average Quantity (gpd)	Standby Annual Average Quantities (gpd)
District ID No.	Owner ID No.	District ID No.	Owner ID No.		
89	B-1B			0	103,500

TOTAL DEMAND QUANTITIES

TOTAL DEMAND QUANTITIES – Sum the demand itemized in Parts VI, VII, and VIII.

Annual Average Daily		Peak Month		Maximum Daily	
Ground Water:	<u>226,546</u> gpd	Ground Water:	<u>340,760</u> gpd	Ground Water:	<u>NA</u> gpd
Surface Water:	<u>25,000</u> gpd	Surface Water:	<u>50,000</u> gpd	Surface Water:	<u>72,000</u> gpd
Alternative Water:	<u>NA</u> gpd	Alternative Water:	<u>NA</u> gpd	Alternative Water:	<u>NA</u> gpd
Imported Water:	<u>NA</u> gpd	Imported Water:	<u>NA</u> gpd	Imported Water:	<u>NA</u> gpd

PART IX. MONITOR SITES

If there are any monitor sites, including withdrawal points also used for monitoring, complete the table on the next page using the codes below. If you are not the owner of the monitor site, provide owner's name and disregard the "frequency" category.

There are no monitor sites on this property (skip to next section)

MONITOR TYPES

Code	Description of Device	
DM	Discharge meter	<i>Discharge through a pipe</i>
EM	Effluent meter	<i>Discharge from a treatment plant or meter at a reuse customer's site</i>
EP	Evaporation Pan	<i>Evaporation; usually associated with a surface water body</i>
ES	Environmental Site	<i>Usually a wetland, lake, riverine environment or estuary</i>
F	Flume	<i>Narrows flow and measures height in flume for discharge rate</i>
FM	Flow Meter	<i>Measures stream flow, or discharge from a site, not from a WD point.</i>
MW	Monitor Well	<i>Monitor ground water</i>
PM	Piezometer	<i>Monitor ground water</i>
RG	Rain Gauge	<i>Rainfall</i>
SG	Staff Gauge	<i>Flow rate or surface water body level indicator</i>
SS	Sample Site	<i>Sample Site at the surface (land, lake stream, spring, estuary, etc.)</i>
TM	Thermometer	<i>Temperature measurement.</i>
WR	Weir	<i>Flow rate or level indicator</i>

MONITOR USES

Code	Description of Use	
AL	Aquifer Levels	<i>Water levels in wells</i>
DF	Discharge Flow	<i>Flow from site or facility</i>
EA	Environmental Monitoring	<i>Water inflow to an augmented environmental site</i>

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
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MP	Mine pit water levels	<i>Dewatering level</i>
RF	Rainfall	<i>Local precipitation</i>
S	Salinity	<i>Salinity of a surface water body</i>
SA	Salt Water Wedge	<i>Tidal function in an estuary</i>
SF	Stream flow	<i>Stream flow of canal, stream, river</i>
SI	Aquifer Saline Water Interface	<i>Monitor well placed at the saline water interface in an aquifer</i>
SW	Aquifer Saline Water Intrusion	<i>Monitor well inland of saline water interface</i>
TA	Temperature of Air	<i>As stated</i>
TB	Water Turbidity	<i>As stated</i>
TW	Temperature of Water	<i>This can be surface water or groundwater</i>
U	Contamination Plume	<i>Monitors location and concentration of contaminant plume in aquifer</i>
WF	Wetland Function	<i>Functionality health of a wetland</i>
WL	Wetland Water Level	<i>Surface water levels in a wetland</i>
WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	SG-1	SG-11	SG-18	MW-19
District ID No.	1	11	18	19
Owner Name <i>(Applicant, SWFWMD, USGS, FGS, etc)</i>	Applicant	Applicant	Applicant	Applicant
Type <i>(Reference "MONITOR TYPES" codes previous page)</i>	SG	SG	SG	MW
Use <i>(Reference "MONITOR USES" codes previous page)</i>	LL	LL	LL	AL
Frequency – <i>(Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate))</i>	Semimonthly	Semimonthly	Semimonthly	Semimonthly

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

- Non-groundwater flow impact assessment attached. Full documentation is required.
- Ground water flow model attached. See "Water Use Permit Information Manual", Part C, Water Use Design Aids, which contains, "Ground Water Modeling Impact Analysis And Reporting Guidelines" that the applicant may choose to use to assist the applicant in the design and submittal of ground water flow models in support of a WUP application. It is attached to this document for the applicant's convenience, but it is not part of the application.
- Mitigation Plan Attached
- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
LL	Surface water body water level	<i>Lake, pond, reservoir, riverine impoundment</i>
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RF	Rainfall	<i>Local precipitation</i>
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TB	Water Turbidity	<i>As stated</i>
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WF	Wetland Function	<i>Functionality health of a wetland</i>
WL	Wetland Water Level	<i>Surface water levels in a wetland</i>
WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	MW-20	MW-21	SG-22	SG-28
District ID No.	20	21	22	28
Owner Name <i>(Applicant, SWFWMD, USGS, FGS, etc)</i>	Applicant	Applicant	Applicant	Applicant
Type <i>(Reference "MONITOR TYPES" codes previous page)</i>	MW	MW	SG	SG
Use <i>(Reference "MONITOR USES" codes previous page)</i>	AL	AL	LL	LL
Frequency – <i>(Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate))</i>	Semimonthly	Semimonthly	Semimonthly	Semimonthly

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

- Non-groundwater flow impact assessment attached. Full documentation is required.
- Ground water flow model attached. See "Water Use Permit Information Manual", Part C, Water Use Design Aids, which contains, "Ground Water Modeling Impact Analysis And Reporting Guidelines" that the applicant may choose to use to assist the applicant in the design and submittal of ground water flow models in support of a WUP application. It is attached to this document for the applicant's convenience, but it is not part of the application.
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- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
LL	Surface water body water level	<i>Lake, pond, reservoir, riverine impoundment</i>
MP	Mine pit water levels	<i>Dewatering level</i>
RF	Rainfall	<i>Local precipitation</i>
S	Salinity	<i>Salinity of a surface water body</i>
SA	Salt Water Wedge	<i>Tidal function in an estuary</i>
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WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	MW-50	MW-51	MW-60	MW-61
District ID No.	50	51	60	61
Owner Name <i>(Applicant, SWFWMD, USGS, FGS, etc)</i>	Center Hill, LLC, and Danny Cowart	Applicant	Applicant	Applicant
Type <i>(Reference "MONITOR TYPES" codes previous page)</i>	MW	MW	MW	MW
Use <i>(Reference "MONITOR USES" codes previous page)</i>	AL	AL	AL	AL
Frequency – <i>(Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate))</i>	Semimonthly	Semimonthly	Semimonthly	Semimonthly

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

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- Ground water flow model attached. See "Water Use Permit Information Manual", Part C, Water Use Design Aids, which contains, "Ground Water Modeling Impact Analysis And Reporting Guidelines" that the applicant may choose to use to assist the applicant in the design and submittal of ground water flow models in support of a WUP application. It is attached to this document for the applicant's convenience, but it is not part of the application.
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- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
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WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	SG-62	SG-63	MW-64	MW-66
District ID No.	62	63	64	66
Owner Name (<i>Applicant, SWFWMD, USGS, FGS, etc</i>)	Applicant	Applicant	Applicant	Applicant
Type (<i>Reference "MONITOR TYPES" codes previous page</i>)	SG	SG	MW	MW
Use (<i>Reference "MONITOR USES" codes previous page</i>)	LL	LL	AL	AL
Frequency – (<i>Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate)</i>)	Semimonthly	Semimonthly	Semimonthly	Semimonthly

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

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- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
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RF	Rainfall	<i>Local precipitation</i>
S	Salinity	<i>Salinity of a surface water body</i>
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TB	Water Turbidity	<i>As stated</i>
TW	Temperature of Water	<i>This can be surface water or groundwater</i>
U	Contamination Plume	<i>Monitors location and concentration of contaminant plume in aquifer</i>
WF	Wetland Function	<i>Functionality health of a wetland</i>
WL	Wetland Water Level	<i>Surface water levels in a wetland</i>
WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	MW-67	MW-68	MW-69	MW-70
District ID No.	67	68	69	70
Owner Name <i>(Applicant, SWFWMD, USGS, FGS, etc)</i>	Applicant	Applicant	Applicant	Applicant
Type <i>(Reference "MONITOR TYPES" codes previous page)</i>	MW	MW	MW	MW
Use <i>(Reference "MONITOR USES" codes previous page)</i>	AL	AL	AL	AL
Frequency – <i>(Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate))</i>	Semimonthly	Semimonthly	Semimonthly	Semimonthly

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

- Non-groundwater flow impact assessment attached. Full documentation is required.
- Ground water flow model attached. See "Water Use Permit Information Manual", Part C, Water Use Design Aids, which contains, "Ground Water Modeling Impact Analysis And Reporting Guidelines" that the applicant may choose to use to assist the applicant in the design and submittal of ground water flow models in support of a WUP application. It is attached to this document for the applicant's convenience, but it is not part of the application.
- Mitigation Plan Attached
- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
LL	Surface water body water level	<i>Lake, pond, reservoir, riverine impoundment</i>
MP	Mine pit water levels	<i>Dewatering level</i>
RF	Rainfall	<i>Local precipitation</i>
S	Salinity	<i>Salinity of a surface water body</i>
SA	Salt Water Wedge	<i>Tidal function in an estuary</i>
SF	Stream flow	<i>Stream flow of canal, stream, river</i>
SI	Aquifer Saline Water Interface	<i>Monitor well placed at the saline water interface in an aquifer</i>
SW	Aquifer Saline Water Intrusion	<i>Monitor well inland of saline water interface</i>
TA	Temperature of Air	<i>As stated</i>
TB	Water Turbidity	<i>As stated</i>
TW	Temperature of Water	<i>This can be surface water or groundwater</i>
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WF	Wetland Function	<i>Functionality health of a wetland</i>
WL	Wetland Water Level	<i>Surface water levels in a wetland</i>
WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	MW-71	MW-72	SG-73	PZ-OS1
District ID No.	71	72	73	74
Owner Name (<i>Applicant, SWFWMD, USGS, FGS, etc</i>)	Applicant	Applicant	Applicant	Ivelisse and Bobonis Rosa
Type (<i>Reference "MONITOR TYPES" codes previous page</i>)	MW	MW	SG	PM
Use (<i>Reference "MONITOR USES" codes previous page</i>)	AL	AL	LL	AL
Frequency – (<i>Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate)</i>)	Semimonthly	Semimonthly	Semimonthly	Semimonthly

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

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- Mitigation Plan Attached
- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
LL	Surface water body water level	<i>Lake, pond, reservoir, riverine impoundment</i>
MP	Mine pit water levels	<i>Dewatering level</i>
RF	Rainfall	<i>Local precipitation</i>
S	Salinity	<i>Salinity of a surface water body</i>
SA	Salt Water Wedge	<i>Tidal function in an estuary</i>
SF	Stream flow	<i>Stream flow of canal, stream, river</i>
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WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	PZ-OS2	SG-OS1	SG-OS2	D-001
District ID No.	75	76	77	78
Owner Name (<i>Applicant, SWFWMD, USGS, FGS, etc</i>)	Mildred Stevenson	Ivelisse and Bobonis Rosa	Mildred Stevenson	Applicant
Type (<i>Reference "MONITOR TYPES" codes previous page</i>)	PM	SG	SG	F
Use (<i>Reference "MONITOR USES" codes previous page</i>)	AL	LL	LL	DF
Frequency – (<i>Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate)</i>)	Semimonthly	Semimonthly	Semimonthly	Continuous*

* = Continuous monitoring when discharge occurs at NPDES Outfall D-001

PART X. IMPACTS

General

Submit an analysis of the impacts caused by your proposed water use as described in the Basis of Review, Part B. If you utilize Alternative Water Supplies, design the impact analysis assuming no receipt of AWS (input the full demand of all withdrawal points that are anticipated to be on standby because AWS is expected to be used). Include your plans to pre-mitigate any impacts predicted to be adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features. If you deem that the impacts predicted in your impact analysis are not adverse to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features, provide a detailed explanation of why you reached the conclusion that they are not. Existing adverse impacts to existing legal water users, off-site land uses, the ground water and/or surface water resources, or environmental features shall not be allowed to be continued.

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- Impacts are predicted to not be adverse. Documentation and explanation attached.

Off-site Features:

If a ground water model was used, in the output map, show the locations of:

General Water Use Permit Application

HB	Hydraulic Barrier	<i>Limit function to PM and SG</i>
LL	Surface water body water level	<i>Lake, pond, reservoir, riverine impoundment</i>
MP	Mine pit water levels	<i>Dewatering level</i>
RF	Rainfall	<i>Local precipitation</i>
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WQ	Water Quality	<i>Surface or ground water quality samples</i>
RE	Retention Pond	<i>Levels in retention ponds, usually associated with augmentation</i>

MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	JC-West	B-1A/B-1B	RG-1	BG-1
District ID No.	81	84	85	86
Owner Name (<i>Applicant, SWFWMD, USGS, FGS, etc</i>)	Applicant	Applicant	Applicant	Robert G. Stokes, Trustee
Type (<i>Reference "MONITOR TYPES" codes previous page</i>)	WR	DM	RG	MW
Use (<i>Reference "MONITOR USES" codes previous page</i>)	SF	DF	RF	AL
Frequency – (<i>Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate)</i>)	Continuous*	Continuous	Continuous	Semimonthly

* = continuous monitoring when discharge occurs at NPDES Outfall D-001

PART X. IMPACTS

General

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General Water Use Permit Application

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WQ	Water Quality	<i>Surface or ground water quality samples</i>
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MONITOR SITE INFORMATION TABLE

See Table 3 for additional details.

See attached Table 3.	Owner ID No.	Owner ID No.	Owner ID No.	Owner ID No.
	BG-2	BG-3	BG-4	SG-91
District ID No.	87	88	90**	91**
Owner Name <i>(Applicant, SWFWMD, USGS, FGS, etc)</i>	City of Webster, Florida	Center Hill, LLC. and Danny Cowart	Menaleous Land Group, LLC.	Applicant
Type <i>(Reference "MONITOR TYPES" codes previous page)</i>	MW	MW	MW	SG
Use <i>(Reference "MONITOR USES" codes previous page)</i>	AL	AL	AL	MP
Frequency – <i>(Hourly, daily, monthly, quarterly, semi-annually, annually, bi-annually, other (indicate))</i>	Hourly	Semimonthly	Semimonthly	Semimonthly

** = proposed District Identification Number

PART X. IMPACTS

General

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