

SECTION I - GENERAL INFORMATION

Reclaimed Water Use Permit # (for existing permit modification)
Type of Application:
Applicant (Permittee)
Name:
Contact Name:
Address:
City, State, Zip:
Phone:
E-mail Address:
Applicant is: Owner Lessee Other
Owner (if different than applicant)
Name:
Contact Name:
Address:
City, State, Zip:
Phone:
E-mail Address:
Consultant (if applicable)
Name:
Contact Name:
Address:
City, State, Zip:
Phone:
E-mail Address:

SECTION II - RECLAIMED WATER APPLICATION SITE INFORMATION

Project		
Project Name:		
Physical Address to be Served:		
City, State, Zip:		
STRAP Number of Property to be Served:		
SECTION III - REQUESTED RECLAIMED WATER ALLOCATION		
Intended Use: 🗌 Landscape Irrig	gation Cooling Towers Other (Specify):	
For Landscape Irrigation		
Irrigated Acreage (acres):		
Reclaimed Water Demand * [Monthly A	verage Daily Flow in Gallons per Day (GPD)]:	
Documentation must be provided to support the	ne calculated demand for reclaimed water	
* Landscape irrigation demand is determined u Management District (SFWMD) in accordance	using the Modified Blaney-Criddle calculation method, as required by the South Florida Water with the Lee County Reclaimed Water Policy	
For Cooling Towers or Other		

Reclaimed Water Demand [Monthly Average Daily Flow in Gallons per Day (GPD)]:

Documentation must be provided to support the calculated demand for reclaimed water

SECTION IV – SITE SPECIFIC INFORMATION

1. Submit a location map showing the general location of the site with North Arrow and landmarks such as roads.

2. Submit a site map showing project boundaries, area of property to be irrigated, and the existing or proposed points of delivery (above ground reclaimed water meter station or in-ground reclaimed water meter).

3. Provide a legal description of the property that is currently served or is proposed to be served with reclaimed water.

4. Identify any existing or proposed supplemental source(s) of water also utilized to supply the intended use for which reclaimed water is being requested. If a supplemental source(s) is in use or proposed, provide a map showing the location of the supplemental source(s) [ie: wells, surface water pumps]. Also indicate the location of the existing or proposed backflow prevention device used to provide cross connection control between the supplemental source (s) and the reclaimed water supply.

5. If a supplemental source(s) is in use or proposed, provide the SFWMD Water Use Permit Number for this source(s).

6. Identify any on-site existing or proposed reclaimed water storage structures. If on-site storage is existing or proposed provide the following:

- a. A map showing the location of the storage structure.
- b. A description of the type of storage structure (ie: isolated pond, above ground tank).
- c. If the storage structure is a pond, is the pond equipped with a liner?
- d. The storage capacity of the structure (based on functional operating water levels).
- e. A description of the type of water level sensing device (for both existing and proposed).

7. If the applicant's project is located in an area with limited fresh water resources, please provide documentation demonstrating that fresh water resources are limited in the project area.

8. Submit plans and specifications for the connection to LCU's reclaimed water system as required by the LCU Design Manual.

SECTION V – APPLICATION SUBMITTAL

The Application and additional information from Section IV shall be submitted to : Lee County Utilities c/o Reclaimed Water Coordinator 1500 Monroe Street, 3rd Floor Fort Myers, FL 33901

For more information or questions regarding the Permit Application please contact: Luis Mendez-Santos, E.I. LMendezSantos@leegov.com 239-533-8571

SECTION VI – APPLICANT CERTIFICATION

I certify that, to the best of my knowledge and belief, all the information provided in this permit application and any supporting document is correct. I understand that any permit issued shall be subject to review, modification, or revocation, in whole or in part, for any false statements made in this application. If a permit is granted, I agree that with advanced notice, LCU staff shall have permission to enter, inspect, observe, collect samples, and take measurements at my property to determine compliance with permit conditions, plans, and specifications.

Applicant's Name (Print or Type)

Applicant's Signature

Date

Owner's Name (Print or Type)

Owner's Signature

Date