



INDIAN RIVER COUNTY/CITY OF VERO BEACH  
BUILDING DIVISION

1801 27<sup>th</sup> Street, Vero Beach, FL 32960 772- 226-1260

## **Demolition Permit Checklist**

*The following items are required with submission of your permit application:*

- **Indian River County/City of Vero Beach Demolition permit application completed.**
- **Owner/Builder Disclosure Statement when applicable.**
- **Documentation that verifies job value. Examples include a copy of the signed contract between the owner and contractor or a signed estimate, etc.**
- **Applicant must provide 2 copies of a legible survey or site plan indicating structure to be demolished or clear indication of partial structure to be demolished.**
- **Applicant must submit a Pre-Demolition application to the Environmental Health Department for permitting and obtain Health Department approval prior to the issuance of the Demolition permit by the Building Division. For the applicant's convenience, attached to this application is a copy of the *Florida Department of Health Application for Approval of Demolition*.**
- **Swimming Pool demolitions have specific requirements. See attached Notice for Demolition of In-Ground Swimming Pools for further guidance.**
- **A Recorded Notice of Commencement (NOC) preferred to be submitted with application but must be submitted prior to first inspection if job value exceeds \$2500.**
- **Applicants are advised that Building Permit Applications are considered incomplete until all other IRC/COVB Departments and other Governmental agency reviews are completed and approved. The Building Permit Application will be routed to other departments, even if considered incomplete, in order to expedite the review process. The Building Permit Application review and approval time clock does not start until the application is deemed a Complete Application.**



INDIAN RIVER COUNTY/CITY OF VERO BEACH  
BUILDING DIVISION

1801 27<sup>th</sup> Street, Vero Beach, FL 32960 772- 226-1260

# Demolition Permit Application

Parcel #: \_\_\_\_\_ JOB ADDRESS: \_\_\_\_\_

JOB DESCRIPTION: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Contractor FAX: \_\_\_\_\_

Contractor License Number: \_\_\_\_\_ IRC Certificate #: \_\_\_\_\_

Engineer: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contract Price: \_\_\_\_\_

## The below information must be completed for review.

RESIDENTIAL     COMMERCIAL

ENTIRE STRUCTURE DEMOLITON     PARTIAL STRUCTURE DEMOLITION

SWIMMING POOL DEMOLITION- See Notice for Pool Demolition Requirements

Existing Square Footage Under Air: \_\_\_\_\_

Square Footage Under Air To Be Demolished: \_\_\_\_\_

*Applicant must submit a Pre-Demolition application to the Environmental Health Department for permitting and obtain Environmental Health Department approval prior to the issuance of the Demolition permit by the Building Division. See attached applications and notices that may be applicable to your permit.*



INDIAN RIVER COUNTY/ CITY OF VERO BEACH BUILDING DIVISION

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit, and that all work will be performed to meet the standards of all laws regulating construction, insurance, and worker's compensation. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONER, ETC. Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the Engineering Department prior to the issuance of Certificate of Completion. IN APPLYING FOR THIS PERMIT, I HEREBY ATTEST THAT I HAVE THE KNOWLEDGE AND UNDERSTANDING OF ALL THAT IS REQUIRED BY THE FLORIDA BUILDING CODE AND ALL LAWS AND REGULATIONS PERTAINING TO PERFORMING AND COMPLETING THIS TYPE OF WORK.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner Signature

Contractor Signature

Acknowledgement for Person in an Individual Capacity

State of Florida, County of \_\_\_\_\_ The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ by \_\_\_\_\_

who is  personally known or  produced identification Type of ID Produced \_\_\_\_\_ Printed Name of Notary \_\_\_\_\_ Signature of Notary \_\_\_\_\_ Notary Seal

State of Florida, County of \_\_\_\_\_ The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_ by \_\_\_\_\_

who is  personally known or  produced identification Type of ID Produced \_\_\_\_\_ Printed Name of Notary \_\_\_\_\_ Signature of Notary \_\_\_\_\_ Notary Seal

Acknowledgement for Person in a Representative Capacity

State of Florida, County of \_\_\_\_\_ The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, by \_\_\_\_\_ (Name of Person) as \_\_\_\_\_ ( Explain

Representative Capacity) for \_\_\_\_\_ (Name of Party on Behalf of Whom Instrument was Executed).

who is  personally known or  produced identification Type of ID Produced \_\_\_\_\_ Printed Name of Notary \_\_\_\_\_ Signature of Notary \_\_\_\_\_ Notary Seal

State of Florida, County of \_\_\_\_\_ The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, by \_\_\_\_\_ (Name of Person) as \_\_\_\_\_ ( Explain Representative

Capacity) for \_\_\_\_\_ (Name of Party on Behalf of Whom Instrument was Executed).

who is  personally known or  produced identification Type of ID Produced \_\_\_\_\_ Printed Name of Notary \_\_\_\_\_ Signature of Notary \_\_\_\_\_ Notary Seal



**APPLICATION FOR APPROVAL OF DEMOLITION**  
**FLORIDA DEPARTMENT OF HEALTH – INDIAN RIVER COUNTY**  
 1900 27<sup>th</sup> Street, Vero Beach, FL 32960  
 Ph: 772-794-7440  
 Fax: 772-794-7447



Application # \_\_\_\_\_

**No structure in Indian River County shall be demolished unless an approval for same has been issued by the Health Department. Any demolition shall be performed in compliance with the terms and conditions of such approval. (Ord. No. 2003-015, § 4, 4-22-03)**

**Note that reinspection of the site will require an additional fee.**

**NOTICE: The Florida Department of Environmental Protection requires an asbestos survey and notification – applicant is responsible for compliance.**

*Please print or type*

<b>ADDRESS OF PROPERTY</b>	Street Address
	City <span style="float: right;">Zip Code</span>
Property Owner's Name	
Owner Contact Numbers	Business <span style="float: right;">Cell</span>

**DESCRIPTION OF STRUCTURE(S) TO BE DEMOLISHED OR RENOVATED**

Type of Construction <i>(check one)</i> CBS <input type="checkbox"/> W/F <input type="checkbox"/> Steel <input type="checkbox"/> Other <i>(describe)</i> _____	Type of Structure <i>(check one)</i> Single Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Other <i>(describe)</i> _____
Date Constructed	Square Footage
Water Supply <i>(check one)</i> Private Well <input type="checkbox"/> City/County Water <input type="checkbox"/>	Sewage Disposal <i>(check one)</i> Septic tank(s) <input type="checkbox"/> City/County Sewer <input type="checkbox"/>

Contractor's Name	
Contractor's Contact Numbers	Business <span style="float: right;">Cell</span>
Access to Structure <i>(check one)</i> Structure will be open for inspection <input type="checkbox"/> Key is available for access <input type="checkbox"/> Details <i>(describe)</i> _____	

**SIGNATURE OF OWNER OR OWNER'S AGENT** \_\_\_\_\_

**PRINTED NAME** \_\_\_\_\_

**DATE OF APPLICATION** \_\_\_\_\_

To be completed by owner or owner's agent and submitted with required fee to:

Florida Department of Health - Indian River County  
 Environmental Health Division  
 1900 27<sup>th</sup> Street  
 Vero Beach, FL 32960

**TO BE COMPLETED BY HEALTH DEPARTMENT**

FEE *(check one)*  
 S/F - \$75.00   
 M/F or Commercial less than 3000 SF - \$100.00   
 Commercial - \$150.00

**NOTE: Reinspection of site will require an additional \$50 fee**



Indian River County/City of Vero Beach  
Building Division  
1801 27<sup>th</sup> Street  
Vero Beach, FL 32960  
772-226-1260

### DEMOLITION OF IN-GROUND SWIMMING POOLS

A demolition permit is required for the demolition of a gunite in-ground swimming pool and/or spa to ensure that the backfill materials and topsoil in the pool area drain properly and that the materials are adequately compacted to prevent future problems.

The concern is that the abandoned portion of the gunite in-ground swimming pool and/or spa act as a bowl and unregulated backfilling may create an area of super-saturated soil which could prove to be a hazard to public safety. The other consideration is that there may be a future building or addition placed directly above the abandoned swimming pool location and uncompacted fill would not be adequate to support the load, causing the new structure to sustain structural damage as a result of differential settlement. It is important to note that compliance with this procedure does not guarantee that a future addition of other building structures will be allowed to be placed over the abandoned pool/spa. Much of that determination will depend on the codes in effect at the future date as well as the engineer's recommendations for the future structure.

Therefore, the following minimum requirements must be met:

1. Obtain a Demolition Permit from the Building Division. Submit a site plan showing the precise location of the swimming pool/spa and any other existing structure (i.e. garage and house).
2. Minimum requirement: Remove a two foot square section of the concrete gunite at the bottom of the pool at the lowest point in the deep end of the pool and another two foot square section in the shallow end. Additionally, a one foot square section of the concrete gunite must be removed from the bottom of the spa, if one exists. These removed sections will permit any water accumulating in the remaining portion of the pool/spa to drain into the soil below.
3. Remove the pool coping, concrete gunite, and steel rebar around the entire perimeter of the pool and/or spa to a level of at least 24 inches below grade.
4. Electrical: Remove all electrical conductors serving the abandoned pool/spa from the electrical panel and remove or cap the vacated conduits.
5. Fuel/gas: Remove and cap any gas lines servicing the pool heater or similar abandoned gas fired appliances.
6. Plumbing: Remove and cap any plumbing lines serving the abandoned pool/spa.
7. Request an inspection of the work performed to this point. **Do not backfill** with any materials until the Building Inspector has authorized you to proceed.
8. Backfill the pool and/or spa with approved materials.
9. Re-establish proper drainage slopes throughout the area.
10. Schedule the final inspection with the Building Division.

# INDIAN RIVER COUNTY DEMOLITION PERMIT REQUIREMENTS

## DEMOLITION IS CONSIDERED A CONSTRUCTION ACTIVITY

The Environmental Protection Agency's National Pollutant Discharge Elimination System (NPDES) Permits Program regulates construction activities that meet both of the following criteria:

- (1) The project contributes stormwater discharges to surface waters of the state or into a municipal separate storm sewer system (MS4); and
- (2) The project will disturb one or more acres of land or even if the project is less than one acre, it is part of a larger common plan of development or sale that will be one acre or more in size (examples: (a) a subdivision; (b) a road project that ultimately exceeds one acre of disturbed land).

If your project meets the above criteria then you must submit a Notice of Intent (NOI) with the Florida Department of Environmental Protection and be issued a "NPDES Generic Permit for Stormwater Discharge From Large and Small Construction Activities." (FDEP Permit/Form Number 62-621.300(4)(a).

For more information see:

[http://www.dep.state.fl.us/water/stormwater/npdes/permits\\_forms.htm](http://www.dep.state.fl.us/water/stormwater/npdes/permits_forms.htm)

# INDIAN RIVER COUNTY DEMOLITION PERMIT EXEMPTION

**CERTIFICATION:** To the best of my knowledge and belief, the following project is exempt from the Environmental Protection Agency's National Pollutant Discharge Elimination System Permits Program because at least one of the below criteria is met:

- (1) The project does not contribute stormwater discharges to surface waters of the state or into a municipal separate storm sewer system (MS4); or
- (2) The project will disturb LESS THAN one acre of land AND the project is not part of a larger common plan of development or sale that will be one acre or more in size (examples: (a) a subdivision; (b) a road project that ultimately exceeds one acre of disturbed land).

Project Number or Name: \_\_\_\_\_

Address or Location: \_\_\_\_\_

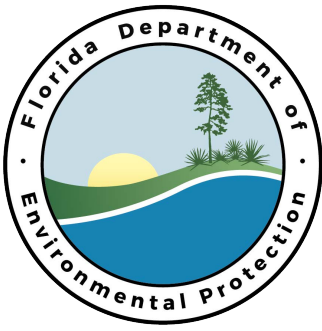
\_\_\_\_\_

Contractor's Name: \_\_\_\_\_

I certify that to the best of my knowledge and belief, the above information is true and accurate. I am aware that there are significant penalties for submitting false information, including fine and/or imprisonment.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



**NOTICE OF INTENT  
TO USE  
NPDES GENERIC PERMIT FOR STORMWATER  
DISCHARGE FROM LARGE AND SMALL  
CONSTRUCTION ACTIVITIES  
(RULE 62-621.300(4), F.A.C.)**

You must submit this completed Notice of Intent (NOI) form to the Department to get coverage under the Generic Permit for Stormwater Discharge from Large and Small Construction Activities provided in subsection 62-621.300(4), F.A.C. The Generic Permit document [DEP Document 62-621.300(4)(a)] tells you what construction activity qualifies for coverage, how you obtain and terminate coverage, what you must do to minimize pollution from your construction site, and what conditions apply to your project to use the generic permit. **You must submit the appropriate generic permit fee, as specified in paragraph 62-4.050(4)(d), F.A.C., with this NOI Form to obtain permit coverage.** You must read and understand the requirements of the generic permit document and the attached instructions before completing this NOI form. **Please print or type information in the appropriate areas below.**

**For construction activities also requiring an Individual Environmental Resource Permit (ERP), under Chapter 62-330, F.A.C.:**

**If your construction activities are already authorized by a valid Individual ERP issued by the Department, Water Management District or a Delegated Local Government, you may also elect to use this NOI form to provide the required notice of commencement of construction, in lieu of Form 62-330.350(1) (“Construction Commencement Notice”).**

**Do you wish to also provide notice of commencement of construction activities authorized under an Individual ERP permit through the use of this form?**    Yes    No

**I. IDENTIFICATION NUMBER:**

- A. Facility ID (if renewing coverage): \_\_\_\_\_
- B. ERP Permit Number\* (if applicable): \_\_\_\_\_
- C. ERP Permitting Agency (if applicable): \_\_\_\_\_

\*If the ERP permit authorizes phased construction, please also indicate which phase.

**II. STORMWATER POLLUTION PREVENTION PLAN (SWPPP) DEVELOPED AND READY TO BE IMPLEMENTED:**    Yes    No

\*If No, you may not submit your NOI at this time.

**III. APPLICANT INFORMATION:**

A. Operator Name: * ERP Permittee Name (if different than “Operator”), if applicable:		B. Operator Status:
C. Address:		
D. City:	E. State:	F. Zip Code:
G. Responsible Authority:		



H. Responsible Authority's Phone No.:
I. Responsible Authority's Fax No.:
J. Responsible Authority's E-mail Address:

**IV. PROJECT/SITE LOCATION INFORMATION:**

A. Project Name:		
B. Project Address/Location:		
C. City:	D. State:	E. Zip Code:
F. County:	G. Latitude:      °      '      "	Longitude:      °      '      "
H. Is the site located on Indian Country Lands?    Yes    No		I. Water Management District:
J. Project Contact:		
K. Project Contact's Phone No.:		
L. Project Contact's Fax No.:		
M. Project Contact's E-mail Address:		
N. Additional E-mail correspondence, optional:		

**V. PROJECT/SITE ACTIVITY INFORMATION:**

A. Indicate whether the project is Large or Small Construction (check only one):	Large Construction (Project will disturb 5 or more acres of land, Fee \$400)
	Small Construction (Project will disturb between 1 and 4.99 acres of land, Fee \$250)
B. Approximate total area of land disturbance from commencement through completion of construction: _____ acres	
C. SWPPP Location:	Address in Part III above      Address in Part IV above      Other address (specify below)
D. SWPPP Address:	
E. City:	F. State:      G. Zip Code:
H. Construction Period:	Start Date:      Completion Date:

**VI. DEWATERING INFORMATION:**

A. Will dewatering operations be performed as part of the construction activities?    No    Yes    If yes, complete below. If no, skip this part and go to Part VII.
B. Is the project site currently identified as contaminated, or is there a site within 500 feet of the dewatering project identified as contaminated by a DEP or EPA cleanup/restoration program? You may use the Quick Link to DEP's Contamination Locator Map (CLM) and DEP's Institutional Controls Registry (ICR) Web Viewer to determine cleanup restoration status. You may access the CLM at: <a href="http://webapps.dep.state.fl.us/DepClnup/welcome.do">http://webapps.dep.state.fl.us/DepClnup/welcome.do</a> or

http://ca.dep.state.fl.us/mapdirect/?focus=contamlocator. The ICR may be accessed at:  
http://www.dep.state.fl.us/waste/categories/brownfields/pages/ICR.htm, or  
http://ca.dep.state.fl.us/mapdirect/?focus=icr

YES Continue to VI.C, below.  
NO Continue to Part VII.

C. Has the site been remediated?

YES Continue to Part VII.  
NO Continue to VI.D, below.

D. Are the pollutants of concern (i.e. contamination) present in ground water at the dewatering project site at concentrations equal to or exceeding the surface water criteria in Rule 62-302.530?

YES Dewatering activities do not qualify for coverage under this generic permit. However, the site may qualify for coverage under Rule 62-621.300(1), F.A.C., or under an individual wastewater permit on the appropriate form listed in Rule 62-620.910, F.A.C.

NO Continue to Part VII.

**VII. DISCHARGE INFORMATION:**

A. MS4 Operator Name (if applicable):

B. Receiving Water Name:

**VIII. CERTIFICATION<sup>1</sup>:**

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.

If providing notice of commencement of construction as required by an Individual Environmental Resource Permit, I also certify that I am authorized by the Permittee (identified in Part III.A., above), to commence construction activities authorized by the ERP Permit (identified in Part I.B., above).

Responsible Authority Name and Official Title (Type or Print):

Responsible Authority Signature:

Date Signed:

<sup>1</sup> Signatory requirements are contained in Rule 62-620.305, F.A.C.

**INSTRUCTIONS – DEP FORM 62-621.300(4)(b)  
NOTICE OF INTENT (NOI) TO USE GENERIC PERMIT FOR STORMWATER DISCHARGE FROM LARGE  
AND SMALL CONSTRUCTION ACTIVITIES**

**Who Must File an NOI:**

You must file the NOI and obtain coverage under the Construction Generic Permit if you discharge stormwater associated with large or small construction activities to surface waters of the State, including through a Municipal Separate Storm Sewer System (MS4), [http://www.dep.state.fl.us/water/stormwater/npdes/docs/all\\_ms4\\_by\\_county.pdf](http://www.dep.state.fl.us/water/stormwater/npdes/docs/all_ms4_by_county.pdf).

**Where to File NOI:**

The Department encourages the electronic submission of NOIs using the Department’s Interactive Notice of Intent (iNOI) available at <http://www.fldeportal.com/go/>. NOIs also may be submitted by paper copy to the following address:

NPDES Stormwater Notices Center, MS #3585  
Florida Department of Environmental Protection  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

**Permit Fee:**

Permit fees for large and small construction activities to be covered under the generic permit are specified in paragraph 62-4.050(4)(d), F.A.C. and available on our <http://www.dep.state.fl.us/water/stormwater/npdes/fees.htm>. You must submit the appropriate generic permit fee (either for large 5+ acres \$400 or small 1- 4.99 acres \$250 construction activities) with the completed NOI to obtain coverage under the generic permit. **Generic permit coverage will not be granted without payment of the appropriate permit fee.**

If the NOI is submitted electronically, the permit fee must be paid on-line by credit card or check. If the NOI is submitted using a paper copy, the permit fee must be paid by either check or money order made payable to: “Florida Department of Environmental Protection”.

**Part I – Identification Number:**

If you are renewing coverage, please enter the project’s DEP identification number (generic permit coverage number) if known. If this is a new project without an ID number then leave this item blank. If you know your ERP Permit Number or ERP Permitting Agency (if applicable) please identify it here, if not then leave these items blank.

**Part II – Stormwater Pollution Prevention Plan (SWPPP) Completed:**

Check the box to indicate whether you have completed your Stormwater Pollution Prevention Plan. You must complete your SWPPP and be ready to implement it before submitting your NOI.

**Part III – Applicant Information:**

Item A.: Provide the legal name of the person, firm, contractor, public organization or other legal entity that owns or operates the construction activity described in this NOI. The operator is the legal entity that has authority to control those activities at the project necessary to ensure compliance with the terms and conditions of the generic permit.

Item B.: Enter the appropriate one letter code from the list below to indicate the legal status of the operator:

F = Federal; S = State; P = Private; M = Public (other than federal or state); O = Other

Items C. – F.: Provide the complete mailing address of the operator, including city, state and zip code.

Items G. – J.: Provide the name, telephone and fax number (including area code) and E-mail address of the person authorized to submit this NOI on behalf of the operator (e.g., Jane Smith, President of Smith Construction Company on behalf of the operator, Smith Construction Company; John Doe, Public Works Director on behalf of the operator, City of Townsville; etc.). This should be the same person as indicated in the certification in Part VI.

#### **Part IV – Project/Site Location Information:**

Items A. – E.: Enter the official or legal name and complete street address, including city, state and zip code of the project. Do not provide a P.O. Box number as the street address. If it lacks a street address, describe the project site location (e.g., intersection of State Road 1 and Smith Street).

Item F.: Enter the county in which the project is located.

Item G.: Enter the latitude and longitude, **in degrees-minutes-seconds format**, of the approximate center of the project.

Item H.: Indicate whether the project is located on Indian Country Lands. If the project is located on Indian Lands you may not use this generic permit. Instead, you must apply to the <http://cfpub.epa.gov/npdes/stormwater/const.cfm> (EPA) for coverage.

Item I.: Enter the appropriate five or six letter code from the list below to indicate the <http://www.dep.state.fl.us/secretary/watman/default.htm> in which your project is located:

NFWWMD = Northwest Florida Water Management District  
SRWMD = Suwannee River Water Management District  
SFWMD = South Florida Water Management District  
SWFWMD = Southwest Florida Water Management District  
SJRWMD = St. John’s River Water Management District

Items J. – M.: Enter the name, telephone and fax number (including area code) and E-mail address of the project contact person. The project contact is the person who is thoroughly familiar with the project, the facts reported in this NOI and who can be contacted by the Department if necessary.

Item N.: Enter additional E-mail correspondence as needed to receive permit related documentation. (Optional)

#### **Part V – Project/Site Activity Information:**

Item A.: Check the appropriate box to indicate whether the project involves large construction activity or small construction activity. **Check one box only.**

“Large Construction Activity” means construction activity resulting in the disturbance of five (5) or more acres of total land area. Large construction activity also includes the disturbance of less than five acres of total land area that is part of a larger common plan of development or sale such as a subdivision that will ultimately disturb five acres or more.

“Small Construction Activity” means construction activity resulting in the disturbance of equal to or greater than one (1) acre and less than five (5) acres of total land area. Small construction activity also includes the disturbance of less than one acre of total land area that is part of a larger common plan of development or sale that will ultimately disturb equal to or greater than one acre and less than five acres.

Item B.: Provide the approximate total area of land disturbance, in acres, that the project will involve from commencement of construction through completion.

Items C. - G.: Indicate the location where the Stormwater Pollution Prevention Plan (SWPPP) can be viewed. Provide the address where the SWPPP can be viewed if other than as provided in Parts II or III of the NOI. **Note that to be eligible for coverage under the generic permit, the SWPPP must have been prepared prior to filing this NOI.**

Item H.: Enter the estimated construction start and completion dates in the MM/DD/YY format.

**Part VI – Dewatering Information:**

If your site has “noncontaminated ground water”, the CGP also authorizes discharges from ground water dewatering activities. A site will be presumed to have uncontaminated if it is not contaminated and there are no known contamination sites within 500 feet of the site. You may use the Department’s <http://webapps.dep.state.fl.us/DepClnup/welcome.do> or the Institutional Controls Registry (ICR) Web Viewer <http://www.dep.state.fl.us/waste/categories/brownfields/pages/ICR.htm> to determine the location of contaminate sites. The CGP does not authorize the discharge of contaminated ground water.

**Part VII – Discharge Information:**

To be covered under a CGP, you must provide the following information about where the discharge from your project will go. NOIs submitted without discharge information cannot be processed.

Item A.: If stormwater from your project discharges to a MS4 enter the name of the MS4 (e.g., City of Tallahassee MS4, Orange County MS4, FDOT District 5 MS4, etc.). If stormwater from your project does not discharge to an MS4 but to surface waters of the State, leave this item blank or indicate “N/A” and skip to Item B. of this part. **Please note that if your project discharges stormwater to an MS4, you must provide the MS4 operator with a copy of the completed NOI.** [http://www.dep.state.fl.us/water/stormwater/npdes/docs/all\\_ms4\\_by\\_county.pdf](http://www.dep.state.fl.us/water/stormwater/npdes/docs/all_ms4_by_county.pdf)

Item B.: If your project discharges stormwater to surface waters of the State, and not to an MS4, enter the name of the receiving water body to which the stormwater is discharged. Please provide the first named water body to which the stormwater from the project is discharged (e.g., Cypress Creek, Tampa Bay, unnamed ditch to St. Johns River, Tate’s Hell Swamp, etc.).

In certain cases, stormwater from the project will discharge to both an MS4 and surface waters of the State. In this case, complete both Item A. and Item B.

**Part VIII – Certification:**

Type or print the name and official title of the Responsible Authority signing the certification. Please note that this must be the same person indicated in Item II.G. as the Responsible Authority. Sign and date the certification.

Section 403.161, F.S., provides severe penalties for submitting false information on this application (NOI) or any reports or records required by a permit. There are both civil and criminal penalties, in addition to the revocation of permit coverage for submitting false information.

Rule 62-620.305, F.A.C., requires that the NOI and any reports required by the permit be signed as follows:

- A. For a corporation, by a responsible corporate officer as described in Rule 62-620.305, F.A.C.;
- B. For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- C. For a municipality, state, federal or other public facility, by a principal executive officer or elected official.