



# APPLICATION FOR A MINOR REVISION TO A WASTEWATER FACILITY OR ACTIVITY PERMIT

## 1. Instructions

- a. In accordance with Rule 62-620.325, F.A.C., this form must be submitted to the appropriate Department district office or approved local program when requests for minor revisions to a permit or minor modifications to a facility are made by a permittee, except for transfer of a permit to a new permittee and addition of a major user of reclaimed water to a Part III reuse system. Application for transfer of a permit to a new permittee shall be made on DEP Form 62-620.910(11). Application for addition of a major user of reclaimed water shall be made on DEP Form 62-610.300(4)(a)1.
- b. Each applicable item must be completed in full in order to avoid delay in processing of this form. Where attached sheets or other technical documentation are provided, indicate appropriate cross-references.
- c. Three (3) copies of this application with supporting documentation shall be submitted with this form.
- d. All information is to be typed or printed in ink. Dates are to be entered in MM/DD/YR format.
- e. This application and attachments shall be signed in accordance with Rule 62-620.305, F.A.C. Also, as applicable, this application and all attachments shall be signed and sealed by a professional engineer registered in Florida in accordance with Rule 62-620.310, F.A.C.

## 2. Facility Information

- a. Permit Number: \_\_\_\_\_ b. Facility Identification Number: \_\_\_\_\_
- c. Project/Facility Name: \_\_\_\_\_
- d. Contact Name: \_\_\_\_\_
- Number and Street: \_\_\_\_\_
- City/State/Zip Code: \_\_\_\_\_
- Telephone: \_\_\_\_\_

## 3. Type of Revision

- Correct Typographical Errors<sup>1</sup>** - Submit one copy of each page of the permit showing revisions being requested.
- Change Improvement Schedule<sup>1</sup>** - Provide a description of the improvement, a list of the dates to be revised, and a reason for the proposed change in each date.
- Change Expiration Date of Permit<sup>1</sup>** - Provide the current and proposed expiration dates for the permit and the reasons for the proposed change.
- Change Staffing Requirements<sup>2</sup>** - Describe the proposed change and submit justification for the change in accordance with Chapter 62-699, F.A.C.

<sup>1</sup>A processing fee is not required.

<sup>2</sup>A processing fee is required with the application in accordance with Rule 62-4.050, F.A.C.

- Change Monitoring and Reporting Requirements<sup>2</sup>** - Describe the proposed change and submit justification for the change in accordance with Chapter 62-601, F.A.C.
- Modify Approved Pretreatment Program<sup>1</sup>** - Describe the proposed modification and provide the information required by Rule 62-625.540, F.A.C.
- Delete Point Source Outfall<sup>1</sup>** - Identify the outfall and explain why the outfall is being eliminated.
- Modify or Expand Approved Residuals Land Application Sites<sup>2</sup>** - Attach a new or updated Agricultural Use or Dedicated Site Plan as required by Chapter 62-640, F.A.C.
- Minor Modification to the Facility<sup>2</sup>** - Provide a description of the proposed modification. If applicable, attach any reports, plans, and specifications which have been developed to implement this modification.
- Other<sup>2</sup>** - Provide appropriate documentation. Describe.

**4. Certifications**

a. Applicant or Authorized Representative

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

\_\_\_\_\_  
 (Signature of Applicant or Authorized Representative<sup>3</sup>)                      (Date)

Name (please type) \_\_\_\_\_ Company Name \_\_\_\_\_  
 Title \_\_\_\_\_ Company Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

b. Professional Engineer Registered in Florida

I certify that the engineering features of this project have been (designed) (examined) by me and found to conform to engineering principles applicable to such projects. In my professional judgement, this facility, when properly constructed, operated, and maintained, will comply with all applicable statutes of the State of Florida and rules of the Department.

Name (please type): \_\_\_\_\_  
 Florida Registration Number: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Company Address: \_\_\_\_\_  
 City/State/Zip Code: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

\_\_\_\_\_  
 (Seal, Signature, Date, and Registration Number)

<sup>3</sup>If signed by the authorized representative, attach a letter of authorization in accordance Rule 62-620.305, F.A.C.