



DEPARTMENT OF HEALTH
APPLICATION FOR LIMITED USE AND PRIVATE WATER SYSTEM
CONSTRUCTION PERMIT

Authority: s. 381.0062, FS, and Rule 64E-8, FAC

INSTRUCTIONS Fill in information on applicable lines. Read the agreement paragraph. Indicate attachments included with this application. Sign and date the application.

Water System Site Name

Name
Address

Permit No. [grid]

Water System Owner

Name
Mailing Address
Phone Numbers home work pager mobile

Water System Contractor / Builder

Name
Address
Phone Numbers FAX pager mobile

Describe water system establishments / residences and water fountain locations (attach additional sheets as needed)

Sizes
Number
Types or uses
Locations of water fountains within building or on-site

Specify make, model, size, and type of the water system and treatment equipment to be installed (attach additional sheets as needed)

Pumps
Tanks
Distribution lines
Treatment equipment

I agree to construct and operate the system in accordance with the plans as approved by the department and with the requirements of s. 381.0062, Florida Statutes and Rule Chapter 64E-8, Florida Administrative Code. I understand that: (1) if the system is not constructed per the approved plans, construction re-inspection requests must be accompanied by additional fees; (2) any misrepresentation of facts in this application or its attachments is grounds for administrative fines and for denial or revocation of the water system construction or operation permit; and (3) prior to receiving an operating permit the county health department must be provided with satisfactory distribution system water quality test results for one lead sample and two consecutive days of coliform bacteria samples. The information contained in this application and on any attachments, all of which serve as the basis for permitting, is true and correct.

Attachments included:

\$75 fee two sets of construction plans two sets of site plans well log

Satisfactory source water quality test results of: five coliform bacteria samples nitrate

Other attachments (specify)

Authorized Construction Applicant Signature Date