



**CLASS II, III, VI
PERMIT APPLICATION FORM**

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For Departmental Use Only

Date Received: _____ Application #: _____ Reviewer: _____

Fee Received: _____ Tracking #: _____

1. Type of Water Control Permit Application:

- ☐ Class II Permit (Construction of drainage system with overflow or outfall in, on or upon any water body).
- ☐ Class III Permit (Construction within county owned or controlled canal right-of-way, reservation, or easement).
- ☐ Class VI Permit (Construction of a drainage system for any project that has known soil or groundwater contamination or that uses, generates, handles, disposes of, discharges, or stores hazardous materials).

2. Checklist: INCOMPLETE APPLICATION PACKAGE WILL NOT BE PROCESSED

- ☐ A set of construction plans*
- ☐ 1 set of drainage calculations*
- ☐ 1 copy of signed and sealed topographic or boundary survey
- ☐ A vertical aerial photograph or project location map
- ☐ Engineer letter of certification (See **ATTACHMENT A**)
- ☐ Application Fee (all fees include a 7.5% RER surcharge):
 - ☐ Estimated cost of project construction \$0 - \$50,000 fee is **\$2,000.00 + 150.00 = \$2,150.00**
 - ☐ Estimated cost of project construction \$50,001 - \$750,000 fee is **\$5,000.00 + 375.00 = \$5,375.00**
 - ☐ Estimated cost of project construction over \$750,000.00 fee is **\$7,500.00 + 562.50 = \$8,062.50**
- ☐ Permit Fee (See **ATTACHMENT B**)

Note: After-the-Fact permit applications will be twice of the application and permit fee, plus Departmental administrative enforcement costs

Other items may be required depending on the nature of the work (See **ATTACHMENT B and C**)

*** Must be signed and sealed by an engineer licensed in the State of Florida.**

See instruction for submittal in page No. 9 and Invoice for **Application & Permit Fee** in page No. 10.

3. Project Information:

This application is for a(n): ☐ New Permit ☐ After-the-Fact Permit

Project Name: _____ Folio: _____

Location: _____

Section: _____ Township: _____ Range: _____ Municipality: _____

Is the proposed work in a contaminated site? ☐ Yes ☐ No ☐ Unknown If yes, refer to **ATTACHMENT C**

Description of proposed work:

3. Project Information (Continuation):

Date activity is proposed to commence _____

Date activity is proposed to be completed: _____

Cost of project construction*: \$ _____

Proposed Use

- ☐ Residential ☐ Commercial ☐ Recreational ☐ Industrial ☐ Highway or road
☐ Agricultural ☐ Institutional ☐ Landfill ☐ Other, Specify: _____

***Cost of project construction is as follows: Class II & VI – total cost of drainage work ONLY, Class III – total cost of construction work within the canal right-of-way, reservation or easement ONLY.**

4. Applicant Information:

This should be the applicant's information for contact purposes.

Name: _____

Company: _____

Address: _____

Zip Code: _____

Phone: _____ Fax: _____

Email: _____

5. Applicant's Authorized Permit Agent:

Agent is authorized to process the application, furnish supplemental information relating to the application and bind the applicant to all requirements of the application.

Name: _____

Company: _____

Address: _____

Zip Code: _____

Phone: _____ Fax: _____

Email: _____

6. Contractor Information:

Name: _____ License No. (County/State): _____

Company: _____

Address: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

7. Professional Engineer Information:

Name: _____ P.E. License No.: _____

Company: _____

Address: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

8. List all permits or certifications that have been applied for or obtained for the above referenced work:

• Issuing Agency _____ Permit Type _____ ID # _____

Application Date _____ Approval Date _____

• Issuing Agency _____ Permit Type _____ ID # _____

Application Date _____ Approval Date _____

• Issuing Agency _____ Permit Type _____ ID # _____

Application Date _____ Approval Date _____

9. APPLICANT AFFIRMATION:

Application is hereby made for a Miami-Dade County Class (circle one) II , III , VI permit to authorize the activities described herein. I agree to or affirm the following:

- I possess the authority to authorize the proposed activities at the subject property, and
- I am familiar with the information, date and plans contained in this application, and
- To the best of my knowledge and belief, the information, data and plans submitted are true, complete and accurate, and
- I will apprise the Department of any changes to information provided in this application, and
- I will provide any additional information, evidence or data necessary to provide reasonable assurance that the proposed project will comply with the applicable State and County water quality standards both during construction and after the project is completed, and
- I am authorizing the permit agent listed in Section 5 of this application to process the application, furnish supplemental information relating to this application and bind me to all requirements of this application, and
- I agree to provide entry to the project site to inspectors and authorized representatives of Miami-Dade County, with proper identification or documents as required by law, for the purpose of preliminary analysis, verification, sampling, monitoring, and observation of permitted activities.
- **Class III only:** The Applicant shall indemnify and hold harmless the County and its officers, employees, agents and instrumentalities from any and all liability, losses or damages, including attorney's fees and costs of defense, which the County or its officers, employees, agents or instrumentalities may incur as a result of claims, demands, suits, causes of actions or proceedings of any kind or nature arising out of, relating to or resulting from performance of this Class III Permit by the Applicant or its employees, agents, servants, partners, principals, subcontractors, or invitees. The Applicant shall pay all claims and losses in connection therewith and shall investigate and defend all claims, suits or actions of any kind or nature in the name of the County, where applicable, including appellate proceedings, and shall pay all costs, judgments, and attorney's fees which may issue thereon. The Applicant expressly understands and agrees that any insurance protection required by this Permit or otherwise provided by the Applicant shall in no way limit the responsibility to indemnify, keep and save harmless and defend the County or its officers, employees, agents and instrumentalities as herein provided.

A. IF APPLICANT IS AN INDIVIDUAL

Signature of Applicant

Print Applicant's Name

Date

B. IF APPLICANT IS OTHER THAN AN INDIVIDUAL OR NATURAL PERSON

(Examples: Corporation, Partnership, Trust, LLC, LLP, etc.)

Print Name of Applicant (Enter the complete name as registered)

Type (Corp, LLC LLP, etc.)

State of Registration/Incorporation

Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Applicant, to bind the Applicant, and if so required to authorize the issuance of a bond on behalf of the Applicant. (If asked, you must provide proof of such authority to the Department). Please Note: If additional signatures are required, pursuant to your governing documents, operating agreements, or other applicable agreements or laws, you must attach additional signature pages (ATTACHMENT D).

Signature of Authorized Representative

Print Authorized Representative's Name

Title

Date

C. IF APPLICANT IS A JOINT VENTURE Each party must sign below (If more than two members, list on attached page)

Print Name of Applicant (Enter the complete name as registered)

Type (Corp, LLC LLP, etc.)

State of Registration/Incorporation

Print Name of Applicant (Enter the complete name as registered)

Type (Corp, LLC LLP, etc.)

State of Registration/Incorporation

Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Applicant, to bind the Applicant, and if so required to authorize the issuance of a bond on behalf of the Applicant. (If asked, you must provide proof of such authority to the Department). Please Note: If additional signatures are required, pursuant to your governing documents, operating agreements, or other applicable agreements or laws, you must attach additional signature pages (ATTACHMENT D).

_____ Signature of Authorized Representative	_____ Print Authorized Representative's Name	_____ Title	_____ Date
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_____ Signature of Authorized Representative	_____ Print Authorized Representative's Name	_____ Title	_____ Date
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10. WRITTEN CONSENT OF THE PROPERTY OWNER FOR THE PROPOSED WORK LOCATION

I/We are the fee simple owner(s) of the real property located at _____ Miami-Dade County, Florida, otherwise identified in the public records of Miami-Dade County as Folio _____. I am aware and familiar with the contents of this application for a Miami-Dade County Class II, III, or VI Permit to perform the work on the subject property, as described in the section 3 of this application. I hereby consent to the work identified in Class II, III, or VI Permit application.

A. IF THE OWNER IS AN INDIVIDUAL

_____ Signature of Owner	_____ Print Owner's Name	_____ Date
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_____ Signature of Owner	_____ Print Owner's Name	_____ Date
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_____ Signature of Owner	_____ Print Owner's Name	_____ Date
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B. IF THE OWNER IS OTHER THAN AN INDIVIDUAL OR NATURAL PERSON

(Examples: Corporation, Partnership, Trust, LLC, LLP, etc.)

_____ Print Name of Applicant (Enter the complete name as registered)	_____ Type (Corp, LLC LLP, etc.)	_____ State of Registration/Incorporation
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Address of Owner

Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Owner, to bind the Owner, and if so required to authorize the issuance of a bond on behalf of the Owner. (If asked, you must provide proof of such authority to the Department). Please Note: If additional signatures are required, pursuant to your governing documents, operating agreements, or other applicable agreements or laws, you must attach additional signature pages (ATTACHMENT E).

_____ Signature of Authorized Representative	_____ Print Authorized Representative's Name	_____ Title	_____ Date
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_____ Signature of Authorized Representative	_____ Print Authorized Representative's Name	_____ Title	_____ Date
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Appropriate signature(s) must be included in:

Box 9: either A, B or C **AND** Box 10: either A or B

The written consent of the property owner is required for all applications to be considered complete. Your application WILL NOT BE PROCESSED unless the Applicant **and** Owner Consent (sections 9 and 10) portions of the application are completed.

NOTE: THIS APPLICATION SHALL NOT, AT ANY TIME, BE CONSTRUED AS A PERMIT TO COMMENCE THE SCOPE OF WORK PROPOSED. WHEN PLANS ARE APPROVED, A PERMIT WILL BE ISSUED BY WATER CONTROL SECTION

ATTACHMENT A

ENGINEER LETTER OF CERTIFICATION

Date:

Miami-Dade County DERM
Water Control Section
701 N.W. 1st Court, 6th floor
Miami, Florida 33136

Re: Project Name: _____

Description of proposed work: _____

This letter will certify that I am an engineer licensed in the State of Florida, qualified by education and experience in the area of construction, and that to the best of my knowledge and belief, the proposed work does not violate any laws of the State of Florida or any provision of the Code of Miami Dade County which may be applicable; that diligence and recognized standard practices of the engineering profession have been exercised in the engineer's design process for the proposed work, and in my opinion based upon my knowledge and belief, the following will not occur:

- a. Harmful obstruction or undesirable alteration of the natural flow of the water within the area of the proposed work.
- b. Harmful or increased erosion, shoaling of channels or stagnant areas of water. (Not applicable to class IV permits)
- c. Material injury to adjacent property.
- d. Harmful effect upon the water quality within the receiving water body of the emergency overflow from a stormwater retention system. (Applicable to class II permits only.)
- e. Adverse environmental impact from changes in water quality or quantity. (Applicable to class IV permits only)

Further, I have been retained by the applicant to provide inspections throughout the construction period and to prepare a set of reproducible record prints of drawings showing changes made during the construction process based upon the marked-up prints, drawings, and other data furnished by the contractor to me.

Sincerely,

Name of Professional Engineer

Signature and Seal of Professional Engineer

P.E. #: _____

ATTACHMENT B

- ☐ Substantiating letter from zoning authority of municipality or county stating that proposed work does not violate applicable zoning law
- ☐ Stormwater pollution prevention plan
- ☐ Percolation test (signed and sealed by an engineer, licensed in the state of Florida - for Class II & Class VI)
- ☐ Manatee grates for outfalls (if applicable)
- ☐ Covenant for the requirements of cut and fill or special basin criteria.
- ☐ 7-A Covenant for lake excavation in well field protection areas.
- ☐ Performance Bond and/or Mitigation Fee: (to be assessed by Water Control Section).
- ☐ Permit Fee information based on cost of project construction listed in page 2 of 10 (Section 3):
 - \$0 - \$25,000 Permit fee is **$\$1,000.00 + 75.00 = \$1,075.00$**
 - \$25,001 - \$250,000 Permit fee is **$\$2,500.00 + 187.50 = \$2,687.50$**
 - Over \$250,000.00 Permit fee is **$\$15,000.00 + 1,125.00 = \$16,125.00$**

Note that based on new information or future submittals, this Department may require additional items prior to the issuance of the permit.



ATTACHMENT C

RER DERM POLLUTION REMEDIATION SECTION TECHNICAL GUIDANCE

miamidade.gov

DRAINAGE PLANS FOR CONTAMINATED SITES

MINIMUM REQUIREMENTS

The appropriate location of drainage structures is essential in preventing the movement of contaminant plumes into previously uncontaminated areas. All drainage installations at contaminated sites shall be reviewed and approved by the DERM's Pollution Remediation Section prior to construction. The scope of work provided by the PRS review is limited to evaluate the location of the proposed drainage system in reference to the contaminated areas. Approval from other departments, and/or sections and other governmental agencies having jurisdiction over the scope of work must be obtained prior to the implementation of the project. The following information is required:

- 1) The location of the contaminant plume(s) in reference to the area of the proposed drainage structures must be included on the site plan. The plume(s) must be delineated both horizontally and vertically to applicable target cleanup levels in the drainage area. Monitoring wells, including identification numbers, must be shown on the plan.
- 2) Groundwater analytical results must be submitted with the plan including copies of laboratory analyses sheets. An updated groundwater sampling event may be required if sample results are greater than nine (9) months old. The sampling event must include all applicable parameters associated with the site's type of contamination.
- 3) The groundwater flow direction must be shown on the plan.
- 4) The location and detailed construction drawings of the proposed drainage structure must be included on the plan (e.g., piping depth, drainage well depth, etc.). Plans must specify the locations of solid and perforated sections of piping. Details of the existing system must be provided if the proposed drainage system ties into the existing drainage system.
- 5) A minimum of two (2) plan sets that include all of the information requested are to be submitted for the review (1 set will be placed in the PRS DERM file). All applicable pages of the drainage plan must be signed and sealed by a Professional Engineer registered in the State of Florida. The appropriate review fee (see below), made out to Miami-Dade County, must be included with the plans.

PRS REVIEW FEES

(See Fee Schedule at <http://www.miamidade.gov/development/library/fees/schedule-environmental.pdf>). All fees include a 7.5% RER surcharge.

- Site under one acre in size: $\$300.00 + \$22.50 = \mathbf{\$322.50}$
- Sites over one acre in size or projects that encompassed multiple contaminated sites: $\$300.00 + \$22.50 = \mathbf{\$322.50}$ plus $\$100.00 + \$7.50 = \mathbf{\$107.50}$ per additional acre or site encompassed by the project

ATTACHMENT D

Class II, III, VI Permit Application Additional Signatures Page

Project Name: _____

Additional Signatures for: ☐ Applicant ☐ Owner

A. IF THE APPLICANT/OWNER IS AN INDIVIDUAL

Signature of Applicant/Owner	Print Name of Applicant/Owner	Date
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Signature of Applicant/Owner	Print Name of Applicant/Owner	Date
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B. and C. IF THE APPLICANT/OWNER IS OTHER THAN AN INDIVIDUAL OR NATURAL PERSON

(Examples: Corporation, Partnership, Trust, LLC, LLP, etc.)

Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Applicant/Owner, to bind the Applicant/Owner, and if so required to authorize the issuance of a bond on behalf of the Applicant/Owner. (If asked, you must provide proof of such authority to the Department). Please Note: If additional signatures are required, pursuant to your governing document, operating agreements, or other applicable agreements or laws, you must attach additional copies of this page.

Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Signature	Print Name	Title	Date
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Department of Regulatory and Economic Resources

Environmental Resources Management

701 NW 1st Court, 6th Floor

Miami, Florida 33136-3912

T 305-372-6567 F 305-372-6407

miamidade.gov

Permit applications should be uploaded through the Online Portal as follows:

1. Click on the link:

<https://www.miamidade.gov/Apps/RER/EPSPortal/PlanReview/DermUpload/Landing>

2. On the first page, click on the link “Submit for Review”

Programs	Submittal Type	Instruction and Guidelines
Coastal	Class I Permit Expedited Administrative Authorization Biological Assessment Wetlands Jurisdictional Determination Binding Letters	Forms and instruction package available online. dermcrr@miamidade.gov
Water Control	Class II, III, V, VI Permits Cut and Fill Drainage Wells Surface Water Management General Permit (ERP)	Forms and instruction packages available online as follows: Class II, Class III, Class V, Class VI, , dermwatercontrol@miamidade.gov
Wetlands	Class IV Permit Expedited Administrative Authorization Biological Assessment Wetlands Jurisdictional Determination Binding Letters	Forms and instruction package available online. dermwetlands@miamidade.gov
Code Coordination and Public Hearings	Municipal Zoning & Site Plan Reviews Letter of Interpretation Environmental Quality Control Board (EQCB)	Christine.Velazquez@miamidade.gov dermioi@miamidade.gov eqcb@miamidade.gov

Getting ready to submit:

- Review the instructions and guidelines before completing the DERM Review Submission form. **Ensure that you are using Google Chrome as your web browser.** If you have questions or encounter problems using this new feature, send an email to (RER) DERM Review Submission (RER-DRS@miamidade.gov). For building-permit related plan reviews that required DERM approvals, please use the Building Submittal Portal

[Submit for Review](#)

3. Enter your name, address, phone, and the project address. In the drop-down menu “Program” select “Water Control”. In the drop-down menu “Submittal Type” select applicable review/permit. Attach your files and click “Submit Application”.

DERM Program & Permit Review Submission

Please complete the fields below and select the appropriate program and submittal type.

First Name *

Last Name *

Email *

Phone *

Project Address (full address, intersection, or folio)

Is this project for Affordable Housing? *

No

Is this project for Workforce Housing? *

No

Program

Water Control

Submittal Type

Class II, III, V, VI Permits

+ Add files... No files selected

Clear

Document	Size	Type	Status
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[Submit Application](#)

[Start Over](#)



Department of Regulatory and Economic Resources

Environmental Resources Management

701 NW 1st Court, 6th Floor

Miami, Florida 33136-3912

T 305-372-6567 F 305-372-6407

miamidade.gov

**Instruction to pay online any application or permit fee associated with
Class II, III, V, VI, SWMGP, DW and CF**

1. Complete the below form and submit it to the Water Control Section via email at DERMwatercontrol@miamidade.gov
2. The Water Control Section staff will request the RER DERM Cashier Section to create the link for payment.
3. The Cashier Section will send the link to the email in the form below.
4. The customer must click on the link provided by the Cashier Section and complete the payment online.
5. Within 24 hours after completing the online payment, the Cashier Section will send a payment receipt.

Invoice for: _____

Customer Name: _____

(name as it appears on credit card/check)

Company Name: _____

Mailing Address: _____

City: _____

State: _____

Zip Code: _____

Contact #: _____

E-mail Address: _____

Permit #/ Application #/ Reference #: _____

(to be provided by County staff)

DERM Reviewer Engineer E-mail: _____

Amount of Fee: _____

Amount of Surcharge: _____

Total Amount to be Paid: _____