

Environmental Resources Management 701 NW 1st Court, 6th Floor Miami, Florida 33136-3912 T 305-372-6567 F 305-372-6407

miamidade.gov

Class V Dewatering Permit Application Form

	For Departmental Use Only	
1. Checklist: Application Fee: Dependent upon duration of dewatering permit (all fees include a 7.5% RER surcharge): 6 days or less \$520.00+\$33.00 = \$559.00* 37-30 days \$553.00+\$73.50 = \$1053.50** 31-90 days \$980.00+\$73.50 = \$1053.50** Complete description of dewatering operation calculations*** Complete description of dewatering operation calculations*** Complete description of dewatering operation calculations*** Site Plan (site plan shall include project boundaries, location of proposed dewatering activity, sedimentation tanks, turbidity barriers, discharge points, berns, monitoring points, etc.) *** ** Time extension requests have to file at least thirty calendar days prior to the time of permit expiration. ** Time extension requests have to file at least thirty calendar days prior to the time of permit expiration. *** Must be signed and sealed by an engineer, architect or land surveyor, licensed in the State of Florida. 2. Project Information: Project Name: Folio #: This application is for a(n): New Permit Address: Zip Code: Name: Zip Code: Name: Zip Code: Phone #: Fax #: Estimated completion date: Zip Code: Phone #: Fax #: Email: Zip Code: <td>Date Received: A</td> <td>Application #:</td>	Date Received: A	Application #:
Application Fee: Dependent upon duration of dewatering permit (all fees include a 7.5% RER surcharge):		Fracking #:
□ 6 days or less \$52.00+\$39.00 = \$559.00* □ 7-30 days \$635.00+\$39.00 = \$559.00* □ 365 days \$2,000.00 + \$150.00 = \$2,150.00** Note: After-the-Fact Permit applications will be charged a penalty fee amounting to 100% of the original fee, plus departmental administrative enforcement costs. □ Complete dewatering operation calculations*** □ Site Plan (site plan shall include project boundaries, location of proposed dewatering activity, sedimentation tanks, turbidity barriers, discharge points, berms, monitoring points, etc.) *** ** Permit issued for less than 30 days, CANNOT BE EXTENDED, a new permit application will be required. ** Time extension requests have to file at least thirty calendar days prior to the time of permit expiration. *** Must be signed and sealed by an engineer, architect or land surveyor, licensed in the State of Florida. 2. Project Information: Project Information: Folio #:	1. Checklist:	
Image: Seta Solution Seta: Seta Solution Seta: Seta Solution Seta: Seta Solution Seta: Se	Application Fee: Dependent upon duration of dewa	tering permit (all fees include a 7.5% RER surcharge):
Note: After-the-Fact Permit applications will be charged a penalty fee amounting to 100% of the original fee, plus departmental administrative enforcement costs. Complete description of dewatering operation applications *** Complete description of dewatering operation calculations*** Site Plan (site plan shall include project boundaries, location of proposed dewatering activity, sedimentation tanks, turbidity barriers, discharge points, berns, monitoring points, etc.) *** ** Time extension requests have to file at least thirty calendar days prior to the time of permit expiration. *** Time extension requests have to file at least thirty calendar days prior to the time of permit expiration. *** Must be signed and sealed by an engineer, architect or land surveyor, licensed in the State of Florida. 2. Project Information: Project Name: Folio #:	□ 7-30 days \$635. □ 31-90 days \$980	00+\$47.63 = \$682.63**).00+\$73.50 = \$1053.50**
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Project Name: Folio #: This application is for a(n): New Permit After-the-Fact Permit Location:	** Time extension requests have to file at least thirty ca	alendar days prior to the time of permit expiration.
This application is for a(n): New Permit After-the-Fact Permit Location:		
Location: Township: Range: Municipality:		
Section: Township: Range: Municipality:		
Municipality:		
Proposed starting date: Estimated completion date: Is the proposed work in a contaminated site? Yes No Is the proposed work in a contaminated site? Yes No If yes, see Attachment "B" 4. Applicant's Authorized Permit Agent: Agentis authorized to process the application, furnish supplemental information relating to the application and bind the application and bind the application of the application. Name:		
Is the proposed work in a contaminated site? Yes No Unknown If yes, see Attachment "B" 3. Applicant Information: This should be the applicant's information for contact purposes. Name:		noted completion detail
If yes, see Attachment "B" 3. Applicant Information: This should be the applicant's information for contact purposes. Name: Company: Address: Zip Code: Phone #: Fax: Email: License # (County/State): S. Contractor Information: License # (County/State): Name:		-
3. Applicant Information: Applicant's Authorized Permit Agent: This should be the applicant's information for contact purposes. 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:		res 🗆 No 🗆 Unknown
This should be the applicant's information for contact purposes. Name: Company: Address: Zip Code: Phone #: Fax: Email: Zip Code: Phone #: Fax: Email: Zip Code: Phone #: Fax: Email: License # (County/State): Company:	If yes, see Attachment "B"	
Zip Code: Zip Code: Phone #:Fax: Phone #:Fax #: Email: Email: 5. Contractor Information:	This should be the applicant's information for contact purposes. Name: Company: Address:	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:
Phone #:Fax: Phone #:Fax #: Email: Email: 5. Contractor Information: Email: Name: License # (County/State): Company: Zip Code: Address: Fax#: Phone #: Fax#:		Zip Code:
5. Contractor Information: Name: License # (County/State): Company: Address: Zip Code: Phone #: Fax#: Email:		Phone #:Fax #:
Name: License # (County/State): Company: Address: Zip Code: Phone #: Email:	Emáli	Email:
Phone #: Fax#: Email:	Name: License Company:	
	Address:	Zip Code:
		Email:

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6. Performance Bond and/or Mitigation Fee: (to be assessed by Water Control Section)

- This permit may require a performance bond to guarantee that work is accomplished according to plan and that no impact to adjacent properties is generated as a result of the permitted dewatering activity.
- A mitigation fee may be required to compensate for any loss of or impact to natural resources due to the extent and duration of the dewatering activity.

7. APPLICANT AFFIRMATION:

Application is hereby made for a Miami-Dade County Class V 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, data 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 4 of this application to process the application, furnish supplemental information relating to this application and bind the applicant 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.

A. IF APPLICANT IS AN INDIVIDUAL

Signature of Applicant	Print A	pplicant's Name		Dat	e
B. IF APPLICANT IS OTHER 1 (Examples: Corporation, Partne			AL PERSON		
rint Name of Applicant (Enter the comp	plete name as registered)	Type (Corp, LL	C LLP, etc.)	State of Registration	on/Incorporation
Jnder the penalty of perjury, I cent Applicant, and if so required, to a proof of such authority to the Dep documents, operating agreement ATTACHMENT "A").	uthorize the issuance opartment). Please Note:	of a bond on be If additional si	half of the Ap gnatures are	plicant. (If asked, y required, pursuant	ou must provide to your governing
ignature of Authorized Representative	Print Authorized Represe	entative's Name	Title		Date
. IF APPLICANT IS A JOINT	VENTURE Each party	must sign below	(If more than	two members, list or	attached page)
		must sign below	` 	two members, list on	,
Print Name of Applicant (Enter the comp	olete name as registered)		C LLP, etc.)		on/Incorporation
rint Name of Applicant (Enter the comp	olete name as registered) olete name as registered) rtify that I have the auth uthorize the issuance o partment). Please Note:	Type (Corp, LL Type (Corp, LL Type (Corp, LL nority to sign th of a bond on be	C LLP, etc.) C LLP, etc.) is application half of the Ap gnatures are	State of Registration State of Registration State of Registration on behalf of the A plicant. (If asked, y required, pursuant	on/Incorporation on/Incorporation pplicant, to bind th ou must provide to your governing
rint Name of Applicant (Enter the comp rint Name of Applicant (Enter the comp nder the penalty of perjury, I cen pplicant, and if so required to a roof of such authority to the Dep ocuments, operating agreement	olete name as registered) olete name as registered) rtify that I have the auth uthorize the issuance o partment). Please Note:	Type (Corp, LL Type (Corp, LL Type (Corp, LL nority to sign th of a bond on be of additional si ogreements or la	C LLP, etc.) C LLP, etc.) is application half of the Ap gnatures are	State of Registration State of Registration State of Registration on behalf of the A plicant. (If asked, y required, pursuant	on/Incorporation on/Incorporation pplicant, to bind th ou must provide to your governing

8. WRITTEN CONSENT OF THE		R FOR THE P	ROPOSED W	ORK LOCAT	ION
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 a					I am
aware and familiar with the contents	of this application for	a Miami-Dade C	county Class V	Permit to perfo	orm the work on the subject
property, as described in the 2 of this	application. I hereby c	onsent to the wo	rk identified in th	nis Class V Pe	rmit application.
A. IF THE OWNER IS AN INDIV	DUAL				
Signature of Owner	Print C	wner's Name			Date
Signature of Owner	Print O	wner's Name			Date
B. IF THE OWNER IS OTHER TO (Examples: Corporation, Partners) Print Name of Applicant (Enter the completed)	ship, Trust, LLC, LLΡ, ε			 State of Regis	tration/Incorporation
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 "A").					
Signature of Authorized Representative	Print Authorized Represe	entative's Name	Title		Date
Signature of Authorized Representative	Print Authorized Represe	entative's Name	Title		Date

Please Review Above

Appropriate signature(s) must be included in:

Box 7: either A, B or C

<u>AND</u>

Box 8: 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 7 and 8) portions of the application are completed.

NOTE: THIS APPLICATION SHALL NOT, AT ANY TIME, BE CONSTRUED AS A PERMIT TO PERFORM A DEWATERING ACTIVITY. WHEN PLANS ARE APPROVED, A PERMIT WILL BE ISSUED BY THE WATER CONTROL SECTION.

Class V 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			
Signature of Applicant/Owner	Print Name of Applicant/	Owner Date			
B. and C. IF THE APPLICANT/C (Examples: Corporation, Partner	WNER IS OTHER THAN AN INDI ship, Trust, LLC, LLP, etc.)	VIDUAL OR NATURAL PERSO	DN		
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		
Signature	Print Name	 Title	Date		
Signature	Print Name	Title	Date		
Signature	Print Name	 Title	Date		
Signature	Print Name	- Title	Date		
Signature	Print Name	Title	Date		
Signature	Print Name	 Title	Date		
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Signature	Print Name	 Title	Date		
Signature	Print Name	Title	Date		
Signature	Print Name	 Title	Date		
Signature	Print Name	Title	Date		



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ATTACHMENT B

TECHNICAL GUIDANCE RER/ERM POLLUTION REMEDIATION SECTION

DEWATERING AT CONTAMINATED SITES

3-10-10

MINIMUM REQUIREMENTS

Dewatering activities are often conducted at contaminated sites (or in their vicinity) in order to perform aquifer pumping tests, underground utilities installation, underground tank and piping installations and repairs, among other construction related activities. All dewatering activities at contaminated sites must be coordinated with the RER/ERM's Pollution Remediation Section prior to implementation. The scope of work provided by PRS review is limited to the predicted influent concentrations, treatment of the recovered groundwater and discharge. The PRS review does not evaluate the predicted flow rates or dewatering procedures and groundwater extraction equipment. 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. Please contact the Water Control Section (WCS) of RER/ERM at (305) 372-6681 pertaining to Class V Permit requirements for Temporary Dewatering Projects.

PRS PLAN REQUIREMENTS

A dewatering proposal must be submitted to RER/ERM's Pollution Remediating Section (PRS) accompanied by a review fee (refer below for applicable review fees), when disposal into the ground, groundwater, surface waters of the sanitary sewers system is intended. The proposal must include the following:

- a. A scaled site diagram showing the water withdrawal location(s) and the effluent disposal location(s).
- b. The groundwater extraction rates, operating schedule and overall duration of dewatering at each location.
- c. The radius of influence (ROI) of the dewatering operations (e.g., based on flow rate(s), duration, etc.).
- d. Current contaminant concentrations (within 9 months) from the areas to be encompassed by the dewatering operations and the groundwater disposal areas, when disposal into the ground or groundwater is intended.
- e. The method of contaminant treatment (when applicable) including technical specifications of the treatment system and expected system influent and effluent concentrations. Supporting calculations, bench or pilot test results, or data from similar applications may be submitted to support the treatment system removal efficiency. The design must be signed and sealed by a professional engineer registered in the State of Florida under Chapter 471, F.S.
- f. The effluent sampling frequency and analysis turnaround time. The treated water must be sampled at the beginning and throughout the operation of the dewatering activities to ensure that applicable standards are not exceeded.
- 2. Only a notification to the PRS is required if off-site disposal using a tanker tuck is intended. A RER/ERM approved waste hauler must be used for disposal. No review fee will apply in this instance.

I. ON SITE DISPOSAL:

1. For on site recharge of dewatering effluent (infiltration gallery, swale etc.), contaminated water must be treated to the applicable cleanup target levels (CTLs) specified in Chapter 62-777, Florida Administrative

Code (F.A.C), Chapter 24, the Miami - Dade County Environmental Protection Ordinance, or any other more stringent standards applicable to the site prior to disposal.

- 2. The treated dewatering effluent shall be discharged to an on-site area out of the contaminant plume to avoid dispersing the plume. If the contaminant plume encompasses the entire site, then alternative disposal locations must be considered. Returning contaminated water to original excavation is not an option.
- 3. The treated effluent must be sampled throughout the dewatering operations to ensure that applicable standards are not exceeded. A 24-hour turnaround time may be required for the processing of the samples in some instances. If at any time the effluent sampling results show levels of contaminants exceeding any of applicable CTLs, the groundwater discharge should be immediately ceased and PRS notified.

II. OFF SITE DISPOSAL:

- 1. Discharge through off-site storm drainage structures or to surface waters:
 - a. If discharging to a surface water body, a United States Environmental Protection Agency (EPA) National Pollutant Discharge Elimination System (NPDES) permit must also be obtained. Further information regarding NPDES permitting for effluents impacted by petroleum contaminants, may be found in the FDEP Remedial Action Guideline BPSS-3. For effluents impacted by other than petroleum contaminants, the Florida Department of Environmental Protection must be contacted for the NPDES requirements.
 - b. The dewatering effluent must be treated to the applicable cleanup target levels (CTLs) specified in Chapter 62-777, Florida Administrative Code (F.A.C.), Chapter 24, the Miami Dade County Environmental Protection Ordinance, or any other more stringent standards applicable to the site prior to disposal.
 - c. The treated effluent must be sampled throughout the dewatering operations to ensure that applicable standards are not exceeded. A 24-hour turnaround time may be required for the processing of the samples in some instances. If at any time the effluent sampling results show levels of contaminants exceeding any of the applicable CTLs, the groundwater discharge should be immediately ceased and the RER/ERM notified.
- 2. Discharge to the sanitary sewer system:
 - a. Approval from the appropriate municipality's water and sewer department (i.e., MDWASA) must be obtained.
 - b. The effluent must be treated to the appropriate sanitary sewer standards, specified in Chapter 24 the Miami Dade County Environmental Ordinance.
 - c. A Sewer Capacity Certification Letter Application must be completed and approved by RER/ERM Plan Review Section.
- 3. Discharge to tanker truck:
 - a. At the conclusion of the activities, disposal receipts must be submitted to the Pollution Remediation Section.

PRS REVIEW FEES (see Fee Schedule at http://www.miamidade.gov/derm/paying_fees.asp)

\$300.00+\$22.50 = **\$322.50** For a plan not including groundwater modeling or a contaminant treatment system \$750.00+\$56.25 = **\$806.25** For a plan including groundwater modeling or a contaminant treatment system



Department of Regulatory and Economic Resources

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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"

the Submit for Review tink below it	r electronic submission of the following reviews. For questions or additional inform	ation, please reach out to the programs by using the email address listed next to each submit	ttal type.
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. dermcr@miamidade.gov	
Vater Control	Class II, III, V, VI Permits Cut and Fili Drainage Wells Surface Water Management General Permit (ERP)	Forms and instruction packages available online as follows: Class II. Class III. Class V. Class V. , dermwatercontrol@miamidade.gov	
Vetlands	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 dermlo@miamidade.gov eqcb@miamidade.gov	

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 Rev Please complete the fields below and		m and submittal type.		
First Name *				
Last Name *				
Email *				
Linan				
Phone *				
Project Address (full address, inte	rection or folio)			
Project Address (latt address, litte	section, or folio,			
Is this project for Affordable Housi	ng? *			
No				~
Is this project for Workforce Housi	ng? *			
No				~
Program				
Water Control				*
Submittal Type				
Class II, III, V, VI Permits				Ŧ
+ Add files No files selected	1			Clear
Document	Size	Туре	Status	
		Submit Application		
	-		I	
				Start Over



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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:	