



**ORANGE COUNTY  
NOTICED GENERAL PERMIT  
APPLICATION FORM**  
WETLAND ENHANCEMENT OR RESTORATION

**Environmental Protection Division**  
3165 McCrory Place, #200  
Orlando, FL 32803

APPLICATION SUBMITTAL DETAILS		
Processing Fee for a Noticed General Permit (Beneficial Activity) is: <b>\$1,332.00</b>		
Payments may be made electronically using the FastTrack permitting portal: <a href="http://ocfl.net">OC Fast Track Home Page (ocfl.net)</a> OR by check submitted to EPD. Please make check payable to: <b>Orange County Board of County Commissioners</b>		
EPD encourages all applications to be electronically submitted. Electronic submittal: <a href="mailto:wetlandpermitting@ocfl.net">wetlandpermitting@ocfl.net</a>		
Have any questions? Please call EPD at: (407) 836-1402 or by email: <a href="mailto:wetlandpermitting@ocfl.net">wetlandpermitting@ocfl.net</a> OR refer to the <a href="#">Applicant's Handbook</a> .		
Total Direct Wetland / Surface Water Impact Acreage:	Total Parcel Size Acreage:	Tax Parcel ID:

SECTION 1		
OWNER OF THE LAND		
Name:		
Title & Company:		
Telephone:	Email Address:	
Address:		
City:	State:	Zip Code:
ENTITY TO RECEIVE PERMIT (IF OTHER THAN OWNER)		
Name:		
Title & Company:		
Telephone:	Email Address:	
Address:		
City:	State:	Zip Code:
AGENT AUTHORIZED TO SECURE PERMIT		
Name:		
Title & Company:		
Telephone:	Email Address:	
Address:		
City:	State:	Zip Code:

CONSULTANT (IF DIFFERENT THAN AGENT)		
Name:		
Title & Company:		
Telephone:	Email Address:	
Address:		
City:	State:	Zip Code:

SECTION 2
PROJECT SITE DETAILS
Property Site Address:
Tax Parcel ID#:

SECTION 3			
PROJECT SPECIFIC CRITERIA			
Qualification for this Noticed General Permit will be determined at the discretion of EPD.			
YES	NO	N/A	STATEMENT (If no, your project will not qualify for an Orange County Noticed General Permit.)
			The project will not serve as mitigation for any other activity or development. [Refer to Section 15-387(c)(3)a]

**SUPPORTING DETAILS**

(Please provide separate 8 ½ by 11-inch sheets for each item below.)

All items below are required in order to obtain your NGP.

	Vicinity/Location Map
	Current aerial photograph of the project site with the parcel boundary shown (max. scale 1:2,400). [Refer to Section 15-387(a)(5)]
	A Wetland and/or Surface Water map of the project site that depicts any potential wetlands or surface waters extending off-site or within one hundred (100) feet of the proposed project. [Refer to Section 15-387(a)(7)]
	Legible plan view drawing depicting proposed wetland enhancement and/or restoration including all dimensions and material to be used. [Refer to Section 15-387(a)(6)]
	Include an Environmental Assessment for all listed plant and animal species and listed and non-listed wildlife that utilize the development site. The assessment shall include but is not limited to an evaluation of the effect of the development site on any identified listed species, a location map of any listed plant and wildlife occurrences, including nests or burrows, a map of any applicable wildlife agency consultation area and a map of any potential wildlife corridors on the development site. [Refer to Section 15-137(a)(11)]
	A Landcover vegetation map utilizing FLUCCS classifications with the parcel boundary shown. [Refer to Section 15-387(a)(12)]
	Describe in detail the wetland enhancement or restoration project and include the following: <ul style="list-style-type: none"> <li>- How the wetland enhancement or restoration will be achieved</li> <li>- Method (biocontrol, chemical, or mechanical) to be used for vegetation (non-native/invasive only) removal, if applicable</li> <li>- Percentage of total vegetation to be removed from each stratum (canopy, subcanopy, and groundcover, if applicable)</li> <li>- Observed and potential occurrence of listed plant and animal species that may be affected by the proposed activity, with relevant measures to be taken to avoid adverse effects</li> <li>- Sedimentation and erosion control plan [Refer to Section 15-387(a)(6)]</li> </ul>
	If applicable, a planting plan with the specific location, species, size, spacing, and the approximate number of native plants to be re-planted, or reasonable demonstration (based on size of treated area, presence of mature seed source, etc.) that the treated area will be naturally colonized by desirable native species following the completion of the project.
	If applicable, a restoration plan for temporary impacts expected during work activities, which may include (but are not limited to) damage to native species in wetlands or upland buffers caused by equipment access or staging.
	A valid Wetland Determination issued pursuant to Section 15-382 unless the wetland determination application is being reviewed concurrently with the NGP application. [Refer to Section 15-387(a)(4)]
	Provide UMAM Sheets Part I & II, pursuant to Chapter 62-345, F.A.C. for each wetland, upland buffer, and surface water system on-site and for mitigation purposes. [Refer to Section 15-387(a)(13)]
	Provide a detailed compensatory mitigation plan that fully describes and shows all mitigation endeavors that are proposed to offset all impacts associated with the proposed project. [Refer to Section 15-417(a)]
	Include all email addresses for names/entities provided in Section 1.

## SECTION 4

### SUMMARY TABLE FOR WETLAND (WL), SURFACE WATER (SW) AND UPLAND BUFFER (UB) PROPOSED IMPACTS

WL/SW/UB ID	Community Type*	Size (acres)	Temporary Impacts (acres)	Permanent Impacts (acres)	Secondary Impacts (acres)	Remaining WL/SW/UB (acres)	Functional Assessment Method	Functional Loss (Secondary Impacts)	Functional Loss (Permanent Impacts)	Mitigation ID

## SECTION 4

### SUMMARY TABLE FOR WETLAND (WL), SURFACE WATER (SW) AND UPLAND BUFFER (UB) PROPOSED IMPACTS

WL/SW/UB ID	Community Type*	Size (acres)	Temporary Impacts (acres)	Permanent Impacts (acres)	Secondary Impacts (acres)	Remaining WL/SW/UB (acres)	Functional Assessment Method	Functional Loss (Secondary Impacts)	Functional Loss (Permanent Impacts)	Mitigation ID
<b>TOTALS:</b>										

\*Florida Land Use, Cover and Forms Classification System (FDOT 1999; website: <https://www.fdot.gov/docs/default-source/geospatial/documentsandpubs/fluccmanual1999.pdf>)

## SECTION 5

### COMPENSATORY MITIGATION

Mitigation ID	Orange County Conservation Trust Fund	Mitigation Bank	If "Other", Please Specify	Mitigation Location	Creation (acres)	Enhancement (acres)	Preservation Wetland (acres)	Preservation Upland Buffer (acres)	Wetland & Surface Water Type	Functional Gain
<b>TOTALS:</b>										

WAIVER OF 30-DAY TIME FRAMES FOR APPLICANT RESPONSE AND OCEPD REVIEW

Please note that pursuant to Chapter 125.022, Florida Statutes establishes timeframes for applicant and agency responses. By checking this box, you are providing written authorization for Orange County, Environmental Protection Division to waive the mandatory timeframes established by law.

**SECTION 6**

**OWNER/AGENT AUTHORIZED TO SECURE PERMIT**

By signing this application form, I am applying, or I am applying on behalf of the property owner, for an Orange County Noticed General Permit on the subject property. I am familiar with the information contained in this application and represent that such information is true, complete, and accurate. I understand this is an application for an Orange County Noticed General Permit, and that any work prior to approval of a permit is a violation of Orange County code. I understand that this application and determination issued pursuant thereto does not relieve me of any obligation for obtaining any other required federal, state, or local permit prior to construction. I understand that any false statement or representation in this application will nullify the permit and understand that a new application with appropriate filing fee will be necessary.

**Typed/Printed Name of Owner or Authorized Agent:**  
*(Corporate Title if applicable)*

**Signature of Owner/Agent:**

**Date:**

**PERSON AUTHORIZING ACCESS TO THE PROPERTY MUST COMPLETE THE FOLLOWING**

**ACCESS TO PROPERTY**

I am either the property owner described in this application, or I have legal authority to allow access to the property, and I consent, after receiving prior notification, to any site visit on the property by personnel from Orange County necessary for the review and inspection of the proposed project specified in this application. I authorize the personnel to enter as many times as may be necessary to make sure such review and inspection.

**Typed/Printed Name of Owner or Legal Authority:**  
*(Corporate Title if applicable)*

**Signature of Owner/Legal Authority:**

**Date:**

**SECTION 7**

**AGENT AUTHORIZATION FORM**

FOR PROJECTS LOCATED IN ORANGE COUNTY, FLORIDA

I/WE, (PRINT PROPERTY OWNER NAME) \_\_\_\_\_, AS THE OWNER(S) OF THE REAL PROPERTY DESCRIBED AS FOLLOWS, \_\_\_\_\_, DO HEREBY AUTHORIZE TO ACT AS MY/OUR AGENT (PRINT AGENT'S NAME), \_\_\_\_\_, TO EXECUTE ANY PETITIONS OR OTHER DOCUMENTS NECESSARY TO AFFECT THE APPLICATION APPROVAL REQUESTED AND MORE SPECIFICALLY DESCRIBED AS FOLLOWS, \_\_\_\_\_, AND TO APPEAR ON MY/OUR BEHALF BEFORE ANY ADMINISTRATIVE OR LEGISLATIVE BODY IN THE COUNTY CONSIDERING THIS APPLICATION AND TO ACT IN ALL RESPECTS AS OUR AGENT IN MATTERS PERTAINING TO THE APPLICATION.

*Date*

*Signature of Property Owner*

*Print Name Property Owner*

*Date*

*Signature of Property Owner*

*Print Name Property Owner*

**STATE OF FLORIDA**

**COUNTY OF \_\_\_\_\_:**

I certify that on \_\_\_ day of \_\_\_\_\_, 20\_\_\_, before me, \_\_\_\_\_, an officer duly authorized by the State of Florida in the county mentioned above, to take acknowledgements, personally appeared \_\_\_\_\_, to me known to be the person described in this instrument or to have produced \_\_\_\_\_ as evidence, and who has acknowledged before me that he or she executed the instrument and did / did not take an oath.

Witness my hand and official seal in the county and state stated above on the \_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

**Signature of Notary Public**  
**Notary Public for the State of Florida**

*(Notary Seal)*

My Commission Expires: \_\_\_\_\_

**Legal Description(s) or Parcel Identification Number(s) are required:**

**PARCEL ID:**

**LEGAL DESCRIPTION:**

EPC-015-2018-01