Section A: General Information for All Activities

PART 1: NAME, APPLICATION TYPE, LOCATION, AND DESCRIPTION OF ACTIVITY

A. Name of project, including phase if applicable:

Loxahatchee River Mile 6 Gap Closure and Oxbow Restoration Maintenance

В.	This is for (check all that apply):					
	\boxtimes	Construction or operation of new works, activities and/ or a stormwater management system				
		Conceptual Approval of proposed works, activities and/ or a stormwater management system				
		Modification or Alteration of existing works activities and / or a stormwater management system. Provide the existing DEP or WMD permit #, if known: Note: Minor modifications do not require completion of this form, and may instead be requested by letter.				
		Maintenance or repair of works, activities and/ or stormwater management system previously permitted by the DEP or WMD Provide existing permit #, if known:				
		Abandonment or removal of works, activities and/ or stormwater management system Provide existing DEP or WMD permit #, if known:				
		Operation of an <i>existing unpermitted</i> stormwater management system.				
		Construction of additional phases of a permitted work, activity and/ or stormwater management system.				
		Provide the existing DEP or WMD permit #, if known:				
C.	List the type of activities proposed. Check all that apply, and provide the supplemental information requested in each of the referenced application sections. Please also reference Applicant's Handbooks I and II for the type of information that may be needed.					
		Activities associated with one single-family residence, duplex, triplex, or quadruplex that do not qualify for an exemption or a General Permit: <i>Provide the information requested in Section B. Do not complete Section C.</i>				
		Activities within wetlands or surface waters, or within 25 feet of a wetland or surface water, (not including the activities associated with an individual residence). Examples include dredging, filling, outfall structures, docks, piers, over-water structures, shoreline stabilization, mitigation, reclamation, restoration/enhancement. Provide the information requested in Section C.				
		Activities within navigable or flowing surface waters such as a multi-slip dock or marina, dry storage facility, dredging, bridge, breakwaters, reefs, or other offshore structures: <i>In addition to Section C, also provide the information requested in Section D.</i>				
		Activities that are (or may be) located within, on or over state-owned submerged lands (See Chapter 18-21, F.A.C. https://www.flrules.org/gateway/ChapterHome.asp?Chapter=18-21): In addition to Section B or C, also provide the information requested in Section F				

		transportation, indust	rial, agricultural, or othe DEP). Provide the info	r land uses, or a solid w	aste facility (excluding	
			ification of Mitigation g/gateway/ChapterHome n G .	•	•	
		•	Section 2.0 of Applica formation requested in		I) that are regulated	by the
		Other, describe: the application are ne	Please contact the eeded. See Attachment	ne Agency to determine 1 for Agency contacts.	which additional sec	tions of
D.		_	the proposed project describe the changes red	=	other activities. For	permit
	constr site to Attach two si that h and re the ac	ructed in 1996 and da be help restore the n nment 1 contains a se tes. The project invol as developed as a re estore mangrove hab	o repair/maintain and amaged during the 200 patural flow of water eries of historical aerial lives placement of national to the proposed act River Management Plan.	5 hurricane season) a within the Loxahatch I photographs docume ve limestone and san to close the gaps, resivities are consistent	and to close a gap a nee River Northwes enting gap formation d fill dredged from store the natural flow with a specific initia	t a new t Fork. In at the a shoal w path, ative of
E.		requested (if known):	wetlands or other surfa ⊠Individual □P e permit #: NWP	ce waters, check the ty rogrammatic General pe ☐Not Applicable		and fill
F.	Projec City: J	•	Address or other location County(ies): Martin	` ' '	: 33469	
		• •	n/canal activities, provide ovide length of project in	•		nes and
G.	Please a relation to graphic s	ttach a location map o major intersections	n, Township, and Range p showing the location or other landmarks. To s), Township(s), and R ite to find it.	on and boundaries o The map should also d	f the proposed act contain a north arrov	ivity in v and a
	Attach	nment 2, Figure 1 depi	icts the project locatio	n.		
	Section	n(s): 21 & 22 Township	o: 40 South Range: 42 E	ast Land Grant name, it	f applicable:	
Н.		, ,	le (DMS) (Taken from de (i.e. U.S.G.S. Quadra		• / •	

	<u>Gap Closure</u> Latitude: 26° 58' 59.60" N; Longitude: 80° 8' 36.63" W						
	Oxbow Restoration Maintenance Latitude: 26° 59' 4.04" N; Longitude: 80° 8' 29.29" W						
I.	Tax Parcel Identification Number(s): Not applicable						
J.	Directions to Site (from major roads; include distances and landmarks as applicable):						
	The project sites are accessible by watercraft (boat, kayak, canoe, etc.). From the Jonathan Dickinson State Park Boat Ramp (Latitude: 26° 59' 17.03" N; Longitude: 80° 8' 33.97" W) follow the watercourse downstream approximately 1,700 feet to reach the gap closure project site. From there, follow the watercourse downstream an additional 700 feet to reach the oxbow restoration maintenance project site.						
K.	Project area or phase area:						
	Gap Closure						
	Dredge Area: 32,040 square feet (0.736 acre) Fill Area: 7,099 square feet (0.163 acre)						
	Oxbow Restoration Maintenance						
	Fill Area: 9,047 square feet (0.208 acre)						
	Total Project Area						
	48,186 square feet (1.106 acres)						
L.	Name of waterbody(ies) (if known) in which activities will occur or into which the system will discharge:						
	Loxahatchee River Northwest Fork						
	ollowing questions (M-O) are not applicable to activities related to a single-family residence, ing private single-family residential docks, piers, seawalls or boat ramps.						
M.	Is it part of a larger plan of development or sale? ☐ yes ☐ no						
N	Impervious or semi-impervious area excluding wetlands and other surface waters (if applicable):						

Volume of water the system is capable of impounding (if applicable): acre-feet. Not applicable

acres or square feet Not applicable

Ο.

PART 2: SUPPLEMENTAL INFORMATION, AND PERMIT HISTORY

Α.	Is this an application to modify an existing Environmental Resource Permit, or to co	nstruct or i	mplement part
	of a multi-phase project, such as a project with a Conceptual Approval permit?	☐ Yes	☐ No If you
	answered "yes", please provide permit numbers below:		

AGENCY	DATE	PERMIT NO.	PROJECT NAME
FDEP	4/6/1995	432649878	NW Fork Loxahatchee River Oxbow Gap Closure
USACE	6/27/1995	199500878 (IP-DS)	NW Fork Loxahatchee River Oxbow Gap Closure

B. Indicate if there have been any *pre-application meeting(s)* or other discussions about the proposed project, system or activity. If so, please provide the date(s), location(s) of the meeting, and the name(s) of Agency staff that attended the meeting(s):

AGENCY	DATE	LOCATION	MEETING ATTENDEES

C. Attach a depiction (plan and section views), which clearly shows the works or other activities proposed to be constructed. Use multiple sheets, if necessary, a scale sufficient to show the location and type of works, and include a north arrow and a key to any symbols used. Specific information to be included in the plans is based on the activities proposed and is further described in Sections B-H. However, supplemental information may be required based on the specific circumstances or location of the proposed works or other activies.

The permit drawings (Attachment 2) depict existing and proposed conditions.

D. Processing Fee: *Please submit the application processing fee along with this application form and supplemental information*. Processing fees vary based on the size of the activity, the type of permit applied for, and the reviewing Agency. Please reference Attachment 3 to determine the appropriate fee.

Once the appropriate processing fee is confirmed, the applicant will submit the fee directly to the District.

PART 3: APPLICANT AND ASSOCIATED PARTIES INFORMATION

Instructions: Permits are only issued to entities having sufficient real property interest as described in Section 4.2.3 (d) of Applicant's Handbook Volume I. Please attach evidence of sufficient real property interest over the land upon which the activities subject to the application will be conducted, including mitigation (if applicable). Refer to Section 4.2.3 (d) for acceptable ownership or real property interest documentation. For corporations, list a person who is a registered agent or officer of the corporation who has the legal authority to bind the corporation.

A. APPLICANT (ENTITY MUST HAVE SUFF THIS IS A CONTACT PERSON F				ST)		
Name: Last: Lakich		First: Joh	ın		Middle:	
Title: Park Manager, Jonathan Dickinso	Company	: Florida Depa	rtment of Enviro	nmental Protection		
Address: 16450 SE Federal Hwy	•					
City: Hobe Sound		State: Florida			Zip: 33455	
Home Telephone:			Work Telephone: (561) 744-9814			
Cell Phone:			Fax:			
E-mail Address: john.lakich@dep.state.	fl.us					
Correspondence will be sent via email	. Check	here to re	ceive correspor	ndence via US Ma	ail:	
B. LAND OWNER(S) (IF DIFFERENT OR IN CHECK HERE IF LAND OWNER IS A						
Name: Last:		First:			Middle:	
Title:		Company	/ :			
Address:						
City:		State:			Zip:	
Home Telephone:		Work Telephone:				
Cell Phone:		Fax:				
E-mail Address:						
Correspondence will be sent via email			·			
C. OPERATION AND MAINTENANCE ENTIT	TY	(see Ap	plicant's Handb	ook I, Section 12.3	3)	
, ,	Contact	t: Last: Ch a	aison First: Joseph		Middle: B	
Title: Executive Director		Company	y: Jupiter Inlet District			
Address: 400 N Delaware Blvd						
City: Jupiter	State: Florida		Zip: 33458			
Home Telephone:		Work Telephone: (561) 746-2223				
Cell Phone:						
E-mail Address: jchaison@jupiterinletdistrict.org						
Correspondence will be sent via email	. Check	here to re	ceive correspor	ndence via US Ma	ail: 🗌	

D. CO-APPLICANT (IF DIFFERENT OR IN ADDITION TO APPLICANT AND OWNER)						
Name: Last: Chaison	First: Joseph Middle: B					
Title: Executive Director	Compan	y: Jupiter Inlet District				
Address: 400 N Delaware Blvd	L					
City: Jupiter	State: FI	orida	Zip: 33458			
Home Telephone:	L	Work Telephone: (561)746-2223				
Cell Phone:		Fax:				
E-mail Address: jchaison@jupiterinletdistrict.org						
Correspondence will be sent via email. Check here	to receive	correspondence via US Mail:				
		PERSON FOR ADDITIONAL INFOR				
Name: Last: Craig	First: Ke		Middle: R			
Title: Vice President, Coastal Engineering	Compan	y: Taylor Engineering, Inc.				
Address: 10199 Southside Boulevard, Suite 3	10					
City: Jacksonville	State: FI	orida	Zip: 32256			
Home Telephone:		Work Telephone: (904) 731-7040)			
Cell Phone:		Fax:				
E-mail Address: kcraig@taylorengineering.com						
Correspondence will be sent via email. Check here	to receive	correspondence via US Mail:				
F. ENVIRONMENTAL CONSULTANT 🖂 THIS IS A	CONTACT	FPERSON FOR ADDITIONAL INFO	RMATION			
Name: Last: Ellis	First: Ch	ristopher	Middle: B			
Title: Group Leader, Environmental	Title: Group Leader, Environmental Company: Taylor Engineering, Inc.					
Services	Compan	y. Taylor Eliginooring, moi				
Address: 10199 Southside Boulevard, Suite 3	10					
City: Jacksonville	State: FI	orida	Zip: 32256			
Home Telephone:		Work Telephone: (904) 731-7040				
Cell Phone:		Fax:				
E-mail Address: cellis@taylorengineering.com						
Correspondence will be sent via email. Check here	to receive	correspondence via US Mail:				
G. AGENT AUTHORIZED TO SECURE PERMIT (IF DIFFERENT FROM CONSULTANT) IN THIS IS A CONTACT PERSON FOR ADDITIONAL INFORMATION						
Name: Last: Ellis	First: Ch	ristopher	Middle: B			
Title: Group Leader, Environmental	Company: Taylor Engineering, Inc.					
Services						
Address: 10199 Southside Boulevard, Suite 310						
City: Jacksonville	State: Florida Zip: 32256					
Home Telephone:						
Cell Phone:						
E-mail Address: cellis@taylorengineering.com						
Correspondence will be sent via email. Check here to receive correspondence via US Mail:						

PART 4: SIGNATURES AND AUTHORIZATION TO ACCESS PROPERTY

Instructions: For multiple applicants please provide a separate Part 4 for each applicant. For corporations, the application must be signed by a person authorized to bind the corporation. A person who has sufficient real property interest (see Section 4.2.3 (d) of Applicant's Handbook Volume I) is required in (B) to authorize access to the property, except when the applicant has the power of eminent domain.

A. By signing this application form, I am applying for the permit and any proprietary authorizations identified above, according to the supporting data and other incidental information filed with this application. 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 and not a permit, and that work prior to approval is a violation. I understand that this application and any permit issued or proprietary authorization issued pursuant thereto, does not relieve of any obligation for obtaining any other required federal, state, water management district or local permit prior to commencement of construction. I agree to operate and maintain the permitted system unless the permitting agency authorizes transfer of the permit to a different responsible operation and maintenance entity. I understand that knowingly making any false statement or representation in this application is a violation of Section 373.430, F.S. and 18 U.S.C. Section 1001.

Joseph B. Chaison, P.E.	1)	,	3-4-21	
Typed/Printed Name of Applicant or Applicant's Authorized Agent_	Signature of Applicant of Authorized Agent	or Applicant's	Date	
Executive Director, Jupiter Inl	et District			
(Corporate Title if applicable)				
B. CERTIFICATION OF SUFFI ACCESS TO THE PROPERTY: I certify that:		RTY INTEREST	AND AUTHORIZATION	FOR STAFF TO
☐ I possess sufficient real p Handbook Volume I, over the have legal authority to grant p signature below, for staff of the lands and waters of the propert in this application. I authorize necessary to make such review for such agents or personnel to	land upon which the termission to access the Agency and the U.S. A yeas necessary for the these agents or person, inspection, and/ or sate	activities describ hose lands. I he rmy Corps of Engreview of the pro- connel to enter ampling. Further,	ped in this application are ereby grant permission, e gineers to access, inspect oposed works and other ac the property as many tir I agree to provide entry to	proposed and levidenced by my, and sample the ctivities specified mes as may be
OR				
☐ I represent an entity having make appropriate arrangements inspect, and sample the property	to enable staff of the			
			1	
Typed/Printed Name	Signature		Date	
(Corporate Title if applicable)				

C. DESIGNATION OF AUTHORIZED AGENT (IF APPLICABLE):

I hereby designate and authorize Christopher B. Ellis (Taylor Engineering, Inc.) to act on my behalf, or on behalf of my corporation, as the agent in the processing of this application for the permit and/or proprietary authorization indicated above; and to furnish, on request, supplemental information in support of the application. In addition, I authorize the above-listed agent to bind me, or my corporation, to perform any requirements which may be necessary to procure the permit or authorization indicated above. I understand that knowingly making any false statement or representation in this application is a violation of Section 373.430, F.S. and 18 U.S.C. Section 1001.

Joseph B. Chaison, P.E.

Typed/Printed Name of Applicant

Signature of Applican

Date

Executive Director, Jupiter Inlet District

(Corporate Title if applicable)