

EXHIBIT W
CENTRAL BROWARD WATER CONTROL DISTRICT
CHECK LIST FOR SINGLE FAMILY HOMES PLAN APPROVAL

Single family home sites not covered under a District approved stormwater management permit shall provide two sets of plans to the Central Broward Water Control District, and provide the following information:

- A. The applicant shall provide a detailed cross-section of the berm to include onsite and existing offsite elevations.
- B. The applicant shall clearly show on the plans existing and proposed grading at no greater than 100-foot grid points extending 25 feet beyond the boundaries of the property.
- C. Plans shall clearly show lot dimensions and square footage
- D. Plans shall indicate the exact location of the building and other proposed structures
- E. Plans shall delineate all existing drainage easements and proposed easements for drainage and/or water management
- F. If offsite discharge is provided, applicant shall indicate what best management practices will be incorporated in the design to reduce pollutant discharges, and shall provide applicable details in the plans.
- G. The applicant shall provide supporting drainage calculations justifying the elevation of the berm and demonstrating that sufficient storage is available to retain the 25-year, 3-day, storm event within the property. The applicant shall tabulate the ground elevation, area, and accumulated storage of available open space, starting at the lowest elevation of the property and at each half-foot increment up to the elevation of the berm. The following sample calculation is provided as guidance:

Elevation (feet NGVD 29)	Partial Area (acres)	Storage (acre-ft)	Accumulated Storage (acre-ft)
5.25 (low elevation)	0.05	0.00	0.00
5.50	0.16	0.026	0.026
6.00	0.21	0.093	0.119
6.50	0.27	0.12	0.239
7.00	0.31	0.145	0.384
7.25 (berm elevation)	0.35	0.066	0.45

Partial storage is calculated: **0.093** = $(0.21+0.16) \times (6.00-5.50) / 2$
 Accumulated storage is calculated: **0.119** = $0.026+0.093$

APPLICATION NO.
PERMIT NO.
For District Use Only

APPLICATION FOR STORMWATER MANAGEMENT PERMIT
CENTRAL BROWARD WATER CONTROL DISTRICT

TO: Board of Commissioners
Central Broward Water Control District
8020 Stirling Road
Hollywood, Florida 33024
Phone: (954) 432-5110
Fax: (954) 432-8603

TYPE OF PERMIT REQUESTED: Plat New Stormwater Management (SWM) Permit
 Modification of Existing SWM Permit SWM Permit Renewal Work within District Right-of-Way

PROJECT TITLE _____

STREET ADDRESS (if known) _____

LOCATION: 1/4 Section _____ Section _____ Township _____ Range _____ Basin (E or W) W
Plat Book _____ Page _____ Folio Number(s) _____

PURPOSE _____ ZONING _____
(Residential, Agricultural, Commercial, etc.)

JURISDICTION _____ COMMISSION ZONE: 1
(City of..., Town of..., etc.) To locate zone, go to: <http://centralbrowardwcd.org/zones/>

PROJECT SIZE (Acres) _____ Total Acres (Per Survey) _____

PROPERTY OWNER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

FAX _____ EMAIL _____

APPLICANT _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

FAX _____ EMAIL _____

FINANCIAL RESPONSIBILITY FOR BILLING _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

FAX _____ EMAIL _____

PROJECT ENGINEER _____
AGENCY CORPORATION _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____ PHONE _____
FAX _____ EMAIL _____

PROPOSED RESPONSIBLE OPERATION & MAINTENANCE ENTITY AFTER CONSTRUCTION

ADDRESS _____
CITY _____ STATE _____ ZIP _____ PHONE _____
FAX _____ EMAIL _____

PROJECT IS: PROPOSED EXISTING TO BE MODIFIED

PROJECT CONSTRUCTION TO BE PHASED Y N LAKE/POND EXISTING ON SITE Y N

DATE CONSTRUCTION/ALTERATION IS EXPECTED TO START _____
& TO BE COMPLETED _____

RECEIVING WATERS FOR PROJECT DRAINAGE AND/OR EXISTING DRAINAGE SYSTEM
JURISDICTIONAL AUTHORITY _____

NOTE: To be considered a complete permit application, this form must be attached to the affidavit of ownership and the supporting documentation required by the Stormwater Management Regulations, Standards, Procedures, and Design Criteria manual of the Central Broward Water Control District, latest edition. **Construction of this project must be commenced within 18 months from the date of approval; otherwise, a new stormwater management permit application and permit application fee must be submitted for review and approval by Central Broward Water Control District.**

DESCRIBE IN GENERAL TERMS THE PROPOSED PROJECT, SYSTEM, OR ACTIVITY; INCLUDING PROPOSED USE OF DISTRICT RIGHT-OF-WAY: _____

[If the owner or applicant is a non-individual entity required by statute or rule to register with the State of Florida Secretary of State, it must be registered, and the person signing the application must have the legal authority to bind the entity with the terms, conditions, and liabilities associated with such application and subsequent permit, if issued. Further, any such entity must maintain their registration with the State of Florida Secretary of State for the duration of the permitted activities.]

By signing this application form, I am applying for the permit 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 agree to provide entry to the project site for employees of the Central Broward Water Control District and employees of the District Engineer's company with proper identification or documents from the Central Broward Water Control District for the purpose of making preliminary on-site analyses. Further, I agree to provide entry to the project site for such employees to monitor permitted work if a permit is granted. 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 pursuant thereto does not relieve me 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 District authorizes transfer of the permit to a responsible operation entity.

Owner _____
(signature) (printed name)

Or

Applicant or Authorized Agent _____
(signature) (printed name)

(Complete the Agent Authorization section on page 7 of 8

**FOR AN INDIVIDUAL ACTING IN HIS OR HER OWN RIGHT, ANY PUBLIC OFFICER,
TRUSTEE, OR PERSONAL REPRESENTATIVE:**

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical
presence or online notarization, this _____ by
(Date)

_____, for
(Name of Officer, Trustee, Attorney in fact)

_____. He/She is personally
(Name of party on behalf whom the instrument is being executed)

known to me or has produced _____ as
(Type of Identification)

identification.

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A CORPORATION:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____ of _____, _____ of _____ a _____ of _____ corporation, on behalf of the corporation. He/She is personally known to me or has produced _____ as identification.

(Date)
(Name of Member, Manager, Officer or Agent) (Title of Member, Manager, Officer or Agent)
(Name of Corporation Acknowledging) (State or Place of Formation)
(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A LIMITED LIABILITY COMPANY:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____
(Date)
_____, _____ of
(Name of Member, Manager, Officer or Agent) (Title of Member, Manager, Officer or Agent)
_____ a _____
(Name of Company Acknowledging) (State or Place of Formation)

Limited Liability Company, on behalf of the company, who is personally known to me or who has produced _____ as
(Type of Identification)
Identification.

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A PARTNERSHIP:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____, partner (or agent) on behalf of _____ a partnership.

(Date)

(Name of Partner or Agent)

(Name of Partnership)

He/She is personally known to me or has produced _____ as identification.

(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

AFFIDAVIT AS TO OWNERSHIP OF PROPERTY

STATE OF FLORIDA)
)ss.
COUNTY OF BROWARD)

BEFORE ME, the undersigned authority personally appeared _____, who, after being duly sworn, deposes and states the following:

1. That I am the _____ of _____, a _____.
2. That I am authorized to sign this affidavit regarding ownership of the property described herein by _____.
3. That _____ is the owner of real property lying, being, and situated in Broward County, Florida, in the geographical boundaries of the Central Broward Water Control District, a political subdivision of the State of Florida.
4. That the legal description of the aforestated property is:

5. That the following individuals or entities are holding mortgages, liens, leases or other encumbrances affecting the aforescribed property (List name, address, and description of encumbrance): _____

6. That no other individuals or entities have any ownership interest in the above-described real property except for those named herein and signing this affidavit.
7. That the undersigned acknowledges that the Central Broward Water Control District has or will be relying on the contents of this affidavit regarding the ownership of the aforescribed property and encumbrances thereon in the preparation of permits, maintenance agreements and other agreements which have been or will be entered into between the owner(s) and the Central Broward Water Control District.
8. That the owner(s) will be developing the property described herein and until the improvements on this property have been completed and accepted by the Central Broward Water Control District, the undersigned acknowledges that they will notify the Central Broward Water Control District of any changes in ownership of the property described herein within five (5) days of such change in ownership.
9. That the undersigned acknowledges that this affidavit may be recorded in the Public Records of Broward County, Florida and that prior to the acceptance of any improvements constructed on the property described herein, the owner and its successors, assigns, and grantees shall keep the Central Broward Water Control District notified of the status of ownership of this property.

FURTHER AFFIANT SAYETH NAUGHT.

IN WITNESS WHEREOF, _____, as the
_____ of _____,
the owner of the property described herein have hereunto set their hand(s) and seal(s) the ____day
of _____, 20_____.

Signed, sealed, and delivered
In the presence of:

OWNER

By: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of physical presence or
online notarization, this _____day of _____, 20_____by (name of
person making statement)_____.

Signature of Notary Public – State of
Florida

Print, Type of Stamp Commissioned Name
of Notary Public

Personally Known

Produced Identification

Type of Identification Produced _____

AGENT AUTHORIZATION SECTION

AGENT'S NAME _____
COMPANY _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____ PHONE _____
FAX _____ EMAIL _____

I authorize the agent listed above to negotiate modifications or revisions, when necessary, and accept or assent to any stipulations on my behalf.

Owner's Signature _____ Date _____
Owner's Name _____

Agent's Signature _____ Date _____
Agent's Name _____

FOR AN INDIVIDUAL ACTING IN HIS OR HER OWN RIGHT, ANY PUBLIC OFFICER, TRUSTEE, OR PERSONAL REPRESENTATIVE:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by
(Date)

_____, for
(Name of Officer, Trustee, Attorney in fact)

_____. He/She is personally
(Name of party on behalf whom the instrument is being executed)

known to me or has produced _____ as
(Type of Identification)

identification.

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A CORPORATION:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by
(Date)

_____, _____ of
(Name of Member, Manager, Officer or Agent) *(Title of Member, Manager, Officer or Agent)*

_____ a _____
(Name of Corporation Acknowledging) *(State or Place of Formation)*

corporation, on behalf of the corporation. He/She is personally known to me or has produced _____ as identification.
(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A LIMITED LIABILITY COMPANY:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____
(Date)
_____, _____ of
(Name of Member, Manager, Officer or Agent) (Title of Member, Manager, Officer or Agent)
_____ a _____
(Name of Company Acknowledging) (State or Place of Formation)

Limited Liability Company, on behalf of the company, who is personally known to me or who has produced _____ as
(Type of Identification)
Identification.

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A PARTNERSHIP:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____, partner (or agent) on behalf of _____ a partnership.

(Date)

(Name of Partner or Agent)

(Name of Partnership)

He/She is personally known to me or has produced _____ as identification.

(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

**SURFACE WATER MANAGEMENT DESIGNATION
AND
DECLARATION OF RESTRICTIVE COVENANTS**

THIS Surface Water Management Designation and Declaration of Restrictive Covenants made this ____ day of _____, 20____, by _____ whose address is _____ hereinafter referred to as "Property Owner".

WITNESSETH:

WHEREAS, Property Owner is the fee title owner of certain lands lying and being in _____, Broward County, Florida, as described in Attachment "A", attached hereto and made a part hereof, hereinafter referred to as "Property" and which is also known by Broward County Property Appraiser's Folio No. _____; and,

WHEREAS, Property Owner seeks to place certain restrictions on the proposed development which will conform to the level of service for drainage as required by the Broward County Land Development Code, Chapter 5, Article IX, Broward County Code of Ordinances; and,

WHEREAS, the _____ is relying upon this designation and covenant in issuance of a building permit for the property and the Central Broward Water Control District ("District") is relying upon this designation and covenant in representing to the _____ that the proposed development meets Broward County's level of service for drainage; NOW, THEREFORE,

The Property Owner hereby declares that the Property shall hereafter be held, maintained, transferred, sold, conveyed, and owned subject to the following designation and restrictive covenants:

1. RESTRICTIONS:

- A. A surface water management area for the storage and flowage of surface water to meet Broward County's level of service standards is hereby established over, across and through the portion of the Property described in Attachment "B" ("Water Management Area").
- B. Property Owner acknowledges that the Property Owner is responsible for maintenance of the entire surface water management area designated by this document and that this area shall be designed, developed and maintained in accordance with the requirements of the District to ensure that the water management area provides for the retention/detention of surface water to meet the applicable level of

service standards.

2. **COVENANT RUNNING WITH THE LAND:** this Restriction and Declaration shall run with the land described in Attachments “A” and “B” and shall be binding on all parties and all persons acquiring title to the Property.

3. **ENFORCEMENT:** The _____ through its _____, its successors and assigns, and the District are the beneficiaries of this Declaration and Restriction; and as such, either the County, the District or the municipality, or any of them, may enforce the terms of this Declaration by an action at law or in equity against any person or persons, entity or entities, violating or attempting to violate said terms. Furthermore, violations of this Designation and restriction shall be contrary to the development permit issued for the development of the Property, and as such, shall constitute a violation of Chapter 5, Article IX, the Broward County Land Development Code, Broward County Code of Ordinances, and may be enforced in any manner that a violation of a county ordinance may be enforced.

4. **AMENDMENT:** This Designation and Restriction may be released in part or in whole by the District upon a determination that the applicable level of service has been reduced or that the construction of additional drainage facilities reduces the need for on-site surface water management applicable level of service has been reduced or that the construction of additional drainage facilities reduces the need for on-site surface water management areas.

(Signature Page to Follow)

IN WITNESS WHEREOF, we have hereunto set our hands and seals the day and year first above written.

Signed, sealed, and delivered
in the presence of:

PROPERTY OWNERS

WITNESS

SIGNATURE

Print Name

Print Name

Address: _____

WITNESS

SIGNATURE

Print Name

Print Name

Address: _____

FOR AN INDIVIDUAL ACTING IN HIS OR HER OWN RIGHT, ANY PUBLIC OFFICER, TRUSTEE, OR PERSONAL REPRESENTATIVE:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by
(Date)

_____, for
(Name of Officer, Trustee, Attorney in fact)

_____. He/She is personally
(Name of party on behalf whom the instrument is being executed)

known to me or has produced _____ as
(Type of Identification)

identification.

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A CORPORATION:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____ of _____, _____ of _____ a _____ corporation, on behalf of the corporation. He/She is personally known to me or has produced _____ as identification.

(Date)
(Name of Member, Manager, Officer or Agent) (Title of Member, Manager, Officer or Agent)
(Name of Corporation Acknowledging) (State or Place of Formation)
(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A LIMITED LIABILITY COMPANY:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____ of _____, _____ a _____

(Date)

(Name of Member, Manager, Officer or Agent) *(Title of Member, Manager, Officer or Agent)*

(Name of Company Acknowledging) *(State or Place of Formation)*

Limited Liability Company, on behalf of the company, who is personally known to me or who has produced _____ as identification.

(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

FOR A PARTNERSHIP:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____, partner (or agent) on behalf of _____ a partnership.

(Date)

(Name of Partner or Agent)

(Name of Partnership)

He/She is personally known to me or has produced _____ as identification.

(Type of Identification)

(Notary Signature)

(Name typed, printed or stamped)

(Title or rank)

(Serial number, if any)

ATTACHMENT "A"

(LEGAL DESCRIPTION OF PROPERTY BEING DEVELOPED)

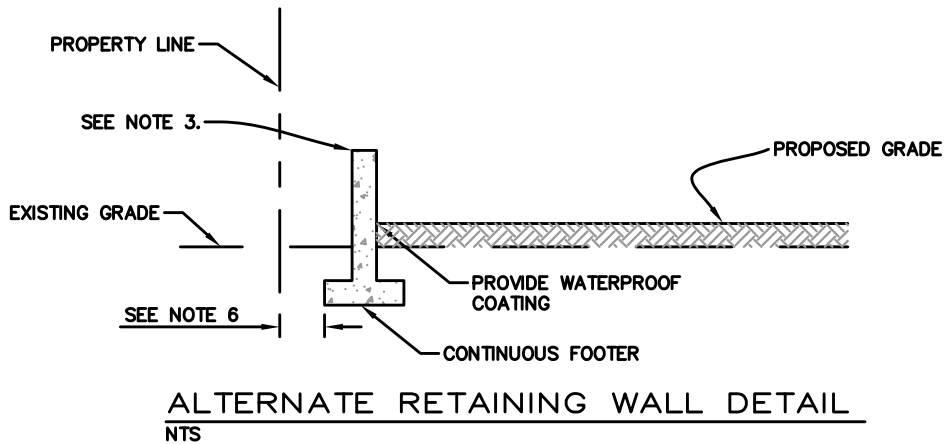
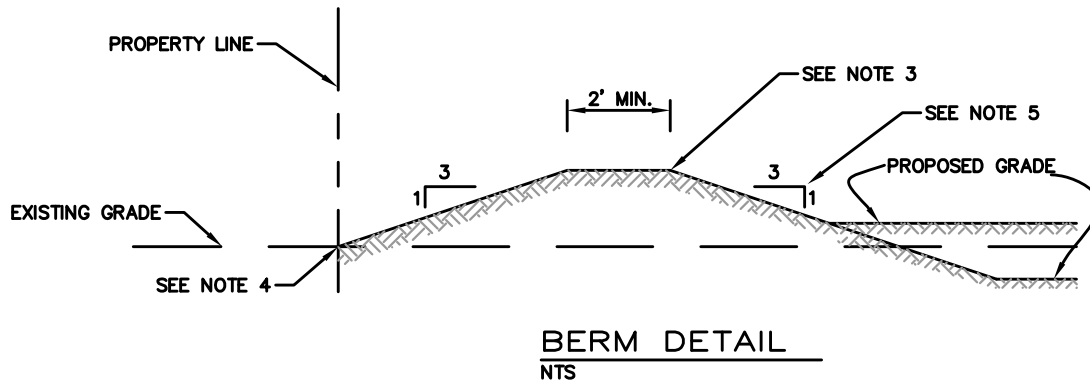
ATTACHMENT "B"

(LEGAL DESCRIPTION OF SURFACE WATER MANAGEMENT AREA)

As shown on the attached sketch.

EXHIBIT I

TYPICAL PERIMETER BERM DETAILS



NOTES:

1. BERM TO BE CONSTRUCTED OF SUITABLE FILL MATERIAL. NO MUCK OR OPEN GRADED SILICA (SUGAR) SAND WILL BE ACCEPTABLE.
2. BERM TO BE COMPACTED TO 92% DENSITY AND SODDED OR STABILIZED IN AN APPROVED METHOD TO PREVENT EROSION.
3. TOP OF BERM OR WALL TO BE CONSTRUCTED TO A MINIMUM ELEVATION EQUAL TO THE PROJECTED 25 YEAR EVENT STORM.
4. NO TEMPORARY OR PERMANENT GRADING WORK SHALL ENCROACH ON ADJACENT PROPERTY.
5. SLOPES MUST BE 4H:1V OR SHALLOWER WHEN BANK IS PART OF A DRY DETENTION/RETENTION AREA.
6. PROVIDE ADEQUATE SEPARATION FROM PROPERTY LINE TO AVOID ABOVE OR BELOW GROUND ENCROACHMENTS ONTO ADJACENT PROPERTY DURING AND AFTER CONSTRUCTION.
7. WALLS SHALL BE DESIGNED PER THE STRUCTURAL DESIGN CRITERIA OF THE FLORIDA BUILDING CODE, LATEST EDITION.

2.15 SINGLE FAMILY HOMES

Single family home sites not covered under a District approved stormwater management permit shall, at a minimum, comply with the following requirements. Compliance with other provisions of the engineering criteria shall be at the discretion of the District Manager.

2.15.1 Prior to initiating any construction activity, including clearing grubbing, or earth moving operations, applicants shall submit two sets of plans and the information in Exhibit "W", Checklist for Single Family Homes Plan Approval, for review and approval by the District Manager. The plans and water management calculations must depict the proposed and planned ultimate or future build-out area extent of buildings, building extensions, structures, decks, pools, site filling, and any other encroachment that would reduce floodplain storage below the required minimum volume.

2.15.2 No developed property shall shed water on adjacent land. The applicant will be required to erect either a wall or berm, or combination thereof, to retain the runoff from the twenty-five year, three-day storm event.

2.15.3 At a minimum, thirty percent (30%) of the site shall remain at existing grade to provide for storage of the 25-year, 3-day rain storm event. Proposed grade shall be one foot above the water control elevation. Higher proposed elevations may be allowed provided that ground elevations in the general area are naturally higher and that the proposed grade elevation is no higher than ground elevations of adjacent properties.

The surface water management area (30% of the site) shall be designated and recorded with the Broward County Board of County Commissioners, County Records Division, Recording Section, 115 South Andrews Avenue, Room 114, Fort Lauderdale, FL 33301, utilizing the forms provided in Exhibit "Z".

2.15.4 If offsite discharges are designed to occur during 25-year and lesser storms, the applicant shall utilize best management practices, in accordance with these engineering criteria, to reduce pollutant discharges.

2.15.5 Prior to receiving the Certificate of Occupancy, the applicant shall submit as-built drawings in accordance with the Checklist for Single Family Homes Plan Approval (Exhibit "W") for the review and approval of the District Manager. Applicant shall grant District staff access to the property for the purpose of conducting visual inspections.

2.15.6 Refer to Section 1.08 regarding enforcement of violations and imposition of penalties.

SCHEDULE OF FEES CHARGED BY CBWCD

RESOLUTION 2022-05, EXHIBIT A

Payment Accepted: Check (make payable to C.B.W.C.D.) or Credit Card (additional fees apply)

All engineering and attorney fees will be recovered at the expense of the applicant

PLAT AND/OR PAVING & DRAINAGE	First five (5) acres Each additional acre or fraction of an acre	\$2,500.00 \$250.00
Pre-application conference		\$100.00
SINGLE FAMILY HOME (3 sets of plans & survey)	Each <u>additional</u> inspection	\$200.00 \$25.00
VARIANCE RESIDENTIAL VARIANCE	Non-refundable application fee.	\$1,500.00/Each \$200.00
USE OF DISTRICT PROPERTY/EASEMENTS	R.O.W. or Easement User Fee	\$250.00/Mile or fraction thereof*
RELEASE OF CANAL RESERVATION		\$200.00
NO LIEN LETTER		\$20.00
FENCE		\$25.00
CULVERT CROSSING (single family)		\$200.00 + \$2,000.00 bond
SINGLE FAMILY GREENHOUSE (3 sets of plans & survey)		\$100.00
ADDITIONS (3 sets of plans & survey)		\$150.00
After-the-Fact Permit		\$50.00
DOCKS AND DECKS (3 sets of plans & survey)		\$50.00
SEAWALL Requirements: Application for permit – Exhibit Q Affidavit of ownership Homeowners' association approval Easement agreement Drawing		\$100.00
STORMWATER RECERTIFICATION		\$250.00
DISCLAIMER (SFWMD Request)		\$100.00