



PALM BEACH COUNTY Department of Environmental Resources Management
2300 North Jog Road, 4th Floor, West Palm Beach, FL 33411-2743
(561) 233-2400 Suncom 274-2400

FOR DEPARTMENT USE ONLY
File # _____
Fee Received _____

**APPLICATION FOR TRANSFER OF AN OPERATING PERMIT
WITHIN WELLFIELD ZONE OF INFLUENCE**

A. INSTRUCTIONS

Please type or print legibly in ink. Complete all items, noting "not applicable" as required. Include all information, drawings and reports necessary to evaluate the facility. Information required to support the application is listed on the attached pages of this form. Submit the original application with supplemental information to the address above.

Enclose a check or money order in the amount of \$50.00 made payable to the "Palm Beach County Board of County Commissioners" to defray the costs of processing this application. The Palm Beach County Department of Environmental Resources Management (ERM) will not process the application unless payment is enclosed.

B. GENERAL INFORMATION

Wellfield Operating Permit Number _____

Previous Facility Name _____

New Facility Name _____

New Facility Owner _____

Facility Location _____
(Street)

_____ (City) (State) (ZIP)

Mailing Address _____
(Street)

_____ (City) (State) (ZIP)

Applicant's Name _____

Telephone Number (____) _____

Contact Person and Title _____

Property Owner _____

Address _____

(Street)

(City)

(State)

(ZIP)

Telephone Number (____) _____

C. CHANGES IN OPERATION

Describe operational changes which effect the manner in which Regulated Substances are stored, used, handled or produced at the facility. (Note: Significant changes may require a modification application to be submitted).

D. ENVIRONMENTAL HISTORY

Is there now or has there been any documented soil or groundwater contamination at this site?

[] Unknown [] No [] Yes,
explain: _____

E. BOND OR LETTER OF CREDIT

If the facility is located within a Zone 1, Zone 2 or Zone 3, submit with this application a cash bond, permit bond, or letter of credit with a corporate surety in the amount according to the table below:

ZONE	AMOUNT
1	\$20,000
2	\$10,000
3	\$ 5,000

No required permit shall be issued unless and until the appropriate bond or letter of credit has been reviewed and approved by the Palm Beach County Attorney's Office and Contract Administration. A permit bond shall be executed by a corporation authorized as a surety in the State of Florida. Copies of blank forms for your use are attached.

NOTE: EXEMPTIONS

Activities that are subject to regulation due only to the accumulation of Waste Regulated Substances need not submit a Bond or Letter of Credit under (j) provided that the accumulated Waste does not exceed 55 gallons if liquid or 220 pounds if solid and is removed from the site on a regular basis, not exceeding 90 days, by a contracted hauler licensed by the EPA or the State of Florida.

Retail and wholesale establishments which store and handle Regulated Substances for resale in original unopened containers do not need to submit a Bond or Letter of Credit provided that no individual container exceeds 5 gallons, if liquid, or 25 pounds, if solid.

F. CERTIFICATION BY APPLICANT

The undersigned owner, operator or authorized representative* of _____ (facility name) certifies that the information in this application for an Operating Permit is true, correct and complete to the best of his/her knowledge and belief. Further, the undersigned agrees to comply with the provisions of Unified Land Development Code, Article 14 Chapter B, Wellfield Protection, and the rules of Palm Beach County Department of Environmental Resources Management (ERM). ERM shall be notified upon the sale or legal transfer of the permitted facility. The undersigned agrees to indemnify and hold Palm Beach County harmless from any and all claims, liabilities, causes of action, or damages arising out of the issuance of the permit, to the extent permitted by Florida law.

Signature of the Owner, Operator or Authorized Representative*

Name and Title

Date

*Attach letter of authorization.

In accordance with the provisions of ADA this document may be requested in an alternate format. Contact (561) 233-2400 for assistance.

LETTER OF AUTHORIZATION

If you are processing and signing a Wellfield Permit Application, and are not the legal owner of the business, the following information must be provided:

DATE _____

This letter authorizes _____ to act as
a _____
(Name)

representative
for _____
(Business)

located at

(Address)

in matters concerning the Palm Beach County Unified Land Development Code, Article 14 Chapter B, Wellfield Protection, and the Wellfield Operating Permit for which you are applying.

Signed,

(Business Owner/Name and Title)

(SEAL)

ATTEST: _____
COMPANY: _____

TITLE: _____ BY: _____

(Corporate Officer or Principal) (Attest as to the signature of
Corporate Officer or Principal)

TITLE: _____

STATE OF _____

COUNTY OF _____

Before me personally appeared, _____,
to me well known and known to me to be the person described in and who executed
the foregoing instrument, and acknowledged to and before me that he/she executed
such instrument for the purpose therein expressed.

Witness my hand and official seal this _____ day of _____, 20_____.

Notary-Public

State of _____ at Large

My Commission Expires:

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