

PHOSPHOGYPSUM STACK SYSTEM CONSTRUCTION/OPERATION PERMIT APPLICATION

PART I - INSTRUCTIONS

Phosphogypsum Stack Systems shall be permitted pursuant to Sections 403.087 and 403.707, Florida Statutes, and in accordance with Rule Chapter 62-673, Florida Administrative Code. A minimum of four copies of the application shall be submitted to the appropriate Department District Office. Complete appropriate sections for the type of facility for which application is made. Entries should be typed or printed in black ink. All blanks should be filled in or marked N/A (not applicable). The application shall include all information, drawings, and reports necessary to evaluate the facility. Information required to support the application is listed on the pages attached to this form.

PART II - GENERAL INFORMATION

Application for permit to: construct or c	operate		
Facility type new lateral ex	pansion		
Phosphogypsum stack Cooling or surge p	ponds Perimet	ter drainage conveyanc	ce 🗌
Other specify:			
Facility name:			
Facility DEP ID No.:			
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Section Township Range _	UTMs: Zone	km E	km N
Applicant Name (Operating Authority):			
Authorized Agent/Consultant Name:			
Contact Person Name:		Phone:	
Street Address & P. O. Box:			
Land Owner (if different from applicant):			
	Facility type new Cooling or surge Phosphogypsum stack Cooling or surge Other specify: Facility name: Facility DEP ID No.: Facility location (main entrance): Location coordinates: Latitude Section Township Range Applicant Name (Operating Authority): Street Address & P. O. Box: City: Contact Person: Name Authorized Agent/Consultant Name: Contact Person Name: Street Address & P. O. Box: City: Land Owner (if different from applicant): Address of Landowner: Street & P. O. Box:	Other specify: Facility name: Facility DEP ID No.: Facility location (main entrance): Location coordinates: Latitude " " Longitude Section Township Range UTMs: Zone Applicant Name (Operating Authority): Street Address & P. O. Box: City: County: Contact Person: Name Authorized Agent/Consultant Name: Contact Person Name: Street Address & P. O. Box: City: County: Land Owner (if different from applicant): Address of Landowner: Street & P. O. Box:	Facility type new

(8)	Acres within phosphogypsum stack system boundary	Acres within property bound	lary
(9)	Volume of phosphogypsum generated: tons/year	tons/day	
(10)	Date site ready to receive phosphogypsum:	Estimated life of facility	years
	Estimated cost of construction, Total \$		
(12)	Anticipated construction starting and completion dates form	to	
]	PART III - PHOPHOGYPSUM STACK CONSTRUC GENERAL REQUIREMEN		ERMIT
Perm	nit application and supporting information shall include the followin	g (62-673.350, F.A.C.)	
		Completeness Check	Location
(1)	Four copies, at a minimum, of the completed application form, eng plans, all supporting data, and reports [62-673.320(2)]	gineering	
(2)	A letter of transmittal to the Department [62-673.320(3)(a)]		
(3)	A table of contents listing the main sections of the application [62-673.320(3)(b)]		
(4)	The permit fee specified in Rule 62-4.05, F.A.C. in check or money payable to the Department [62-673.320(3)(c)]	order	
(5)	Engineer and geologist seal [62-673.320(3)(d)]		
(6)	Demonstration of ownership or control of property [62-673.620(3)	(m)]	
(7)	Proof of publication of notice of application for the proposed activit newspaper of general circulation [62-673.320(4)]	ty in a	
PAl	RT IV - PHOSPHOGYPSUM STACK SITE AND CO	NSTRUCTION INFO	RMATION
appli legib appro syml	following information items must be included in the application or a cable. NOTE: All maps, plan sheets, drawings, isometrics, cross-sole; be signed and sealed by the registered professional engineer responsiste scale to show clearly all required details; be numbered, referenced used, contain horizontal and vertical scales (where applicable), a use uniform scales as much as possible, contain a north arrow, and uniform scales as much as possible, contain a north arrow, and uniform scales as much as possible, contain a north arrow, and uniform scales as much as possible, contain a north arrow, and uniform scales as much as possible, contain a north arrow, and uniform scales are contained to the c	ections, or aerial photograph consible for their preparation; enced to narrative, titled, hav and specify drafting or origin	s shall be be of e a legend of
		Completeness Check	Location
(1)	Hydrogeological investigation [62-673.320(3)(j)]		
(2)	Geotechnical investigation [62-673.320(3)(k)]		
(3)	A map or aerial photograph of the area, no more than 1 year old, she land use and zoning within 1 mile of the facility with all significant features labeled [62-673.320(3)(g)]	_	
(4)	Plot plan on a scale not greater than 200 feet to the inch showing the following items (a) through (d)[62-673.320(3)(h)]	ne 🗌	

		Completeness Check	Location
	(a) Dimensions of phosphogypsum stack system		
	(b) Original elevations		
	(c) Final contours		
	(d) Location of soil borings		
(5)	Topographic maps (which may be combined with the plot plan) on a scale not greater than 200 feet to the inch showing the following items (a) through (f) [62-673.320(3)(i)]		
	(a) Five-foot contour intervals		
	(b) Proposed area of phosphogypsum disposal		
	(c) Cooling ponds, surge ponds, and perimeter drainage conveyances		
	(d) Access roads		
	(e) Grades required for proper drainage		
	(f) Typical cross sections of the phosphogypsum stack system including starter dikes, dames, ditches, cooling, surge ponds, drainage conveyances, and drainage controls.		
(6)	Location requirements [62-673.340(2)]		
	(a) Set back distance from property boundaries		
	(b) 100-year flood plain		
	(c) 500 feet from a shallow supply well		
	(d) 200 feet from a natural or artificial surface water of the state		
(7)	Evidence of an approved laboratory for ground water monitoring [62-673.320(3)(1)]		
	PART V - LINER AND LEACHATE CONTROL SYSTEM AND DESIGN INFORMATION	I PERFORMA	NCE
		Completeness Check	Location
(1)	Liner performance and design [62-673.400(2)(a), (b), & (d)		
	(a) Material type (soil, synthetic, other)		
	(b) Adequate base support		
	(c) Planned installation adequate to cover all surrounding earth		
	(d) Equivalency to design standards		
(2)	Liner quality control plan [62-673.400(2)(c)]		
	(a) Specifications		
	(b) Construction/installation methods		
	(c) Sampling and testing		

		Completeness Check	Location
	(d) Manufacturer's specifications and recommendations		
(3)	Leachate control system standards [62-673.400(2)(e)]		
	(a) Perimeter underdrain to stabilize slopes		
	(b) Perimeter drainage conveyances within liner system		
(4)	Operation requirements [62-673.500]		
	(a) Operation plan		
	(b) Ground water monitoring		
	(c) Collection, control, recycling and treatment of surface	runoff	
	(d) Collection, containment and treatment of leachate		
(5)	Closure Plan [62-673.600]		
	(a) Conceptual design		
	(b) Closure cost estimates		
	(c) Closure schedule		
(6)	Financial responsibility [62-673.640]		
	PART VI - CERTIFICATION BY AP	PLICANT AND ENGINEER	
(1)	Applicant		
Flor corre the p	The undersigned applicant or authorized representative *covare that statements made in this form and the attached in ida Department of Environmental Protection and certificated and complete to the best of his knowledge and belief. Provision of Chapter 403, Florida Statutes, and all rules of transferable, and the Department will be notified before the	nformation are an application for a person that the information in this application for a person that the information in this application for a person that the information in this application for a person that the information for a person	cation is true, o comply with t the permit is
	ach letter of authorization if representative of the owner or a corporate officer.	Signature of Applicant or Authorized	Representative
	_	Name and Title	
		Date Signed:	

(2)	Professional Engineer, Registered in Florida or Public Officer as required in Sections 403.707 and
	403.7075, Florida Statutes

This is to certify that the engineering features of this facility have been designed/examined by me and found to conform to engineering principles applicable to such facilities. In my professional judgment, this facility, when properly maintained and operated, will substantially comply with all applicable statutes of the State of Florida and rules of the Department. It is agreed that the undersigned will provide the applicant with a set of instructions of proper maintenance and operation of this facility.

Signature	Mailing Address
Name and Title (Please type)	City, State, Zip Code
Florida Registration Number	Telephone Number (including area code)
(Please affix seal)	
	Date Signed