



**Charlotte County
Community Development Department, Excavations Division
2010/2011 Excavation Activity Status Report**

Per Ordinances 2003-003 and 2007-054, this report, along with the fee, is to be filed on or before December 31, 2011. The report must include all activity from October 1, 2010 through October 1, 2011. Failure to submit this report may result in suspension of the permitted activities.

Make all checks payable to Charlotte County Board of County Commissioners or CCBCC

Activity Status Report Fees:

Group II and IV: \$1,200

Group III: \$1,250

1. **Excavation Name:** _____ **Group:** _____

2. **Permit Number:** _____ **Permit Expiration Date:** _____

3. **Permittee:** _____

4. **Provide current contact information for the Permittee:**

Name _____ Phone Number _____

Address _____

City _____ State _____ Zip Code _____

Fax number: _____

E-mail address _____

5. **Place a check mark next to the item below which best describes this project:**

_____ Excavation activity related to this project is complete. Closure documentation will be submitted.

_____ Excavation activity has ceased and will not resume. Closure documentation will be submitted. A new application will be filed if excavation is to resume.

_____ Excavation has been temporarily halted, but is expected to resume in accordance with the permit.

Amount of material removed during reporting period _____ cu. yd.

Approximate amount of material removed to date _____ cu. yd.

Remaining amount of material _____ cu. yd.

Number of truckloads during reporting period _____

Continued on next page...

Permit # _____ Excavation Name _____

_____ Excavation progressing as planned.

Amount of material removed during reporting period _____ cu. yd.

Approximate amount of material removed to date _____ cu. yd.

Remaining amount of material _____ cu. yd.

Number of truckloads during reporting period _____

6. Attach a narrative summarizing the Excavation and Reclamation progress to date. The narrative shall include, at a minimum, the following:

- All activity performed at the site during the reporting period.
- Compliance with all conditions of the permit.
- Any non-compliance with conditions of the permit.
- Document any Reclamation that has been completed and how this activity meets or does not meet the plans supplied by the applicant and approved by the Excavation Administrator.

7. Operating Hours and Days:

Begin _____ a.m. End _____ p.m. _____ thorough _____

State any Saturday hours: Begin _____ a.m. End _____ p.m.

State hour first truck enters site: Begin _____ a.m. Last truck leaves site at _____ p.m.

8. Amount of material planned to be excavated during next reporting period _____ cu. yd.

9. Percentage of excavated material of total approved cu. yds. remaining _____ %

10. Note dates of expiration of all permits associated with excavation activity.

SWFWMD _____ Army Corps of Engineers _____

DEP _____ Other (identify) _____

11. Other – Please Explain _____

12. Number of truckloads exiting the site during the reporting period _____

Roadway Service Life Reduction Fee: Copies of truck tickets will need to be provided.

Attach a check for \$1 per truckload.

13. Reclamation Bond # _____

Reclamation Bond Amount * _____

Date Reclamation Bond expires _____

*** Refer to attached Resolution 2010-036**

14. Applicant must submit an As-Built drawing, signed and sealed by a professional engineer, showing current status of the site, applying the terms of Resolution 2010-036 on a tabulation sheet accompanying report.

Permit # _____ Excavation Name _____

Person submitting this form: _____ Owner _____ Agent _____ Engineer _____ Attorney

SWORN STATEMENT

I, the undersigned, being first duly sworn, depose and say that I am empowered to submit this Annual Report, that I have supplied all updated information required by this report form, such and that information is true and accurate to the best of my knowledge.

STATE OF FLORIDA, COUNTY OF CHARLOTTE

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or has/have produced as identification and who did/did not take an oath.

Notary Public Signature

Signature of person supplying information

Notary Printed Signature

Printed Signature

Title

Address

Commission Code

City, State, Zip

Telephone Number

If the person submitting this form is not the engineer, the engineer must complete the following information.

ENGINEER'S CERTIFICATION

I certify all information provided is accurate, and that the As-Built certification has been conducted in accordance with the permit provisions, including the excavation plans.

Signed by Professional Engineer _____

Printed Name _____

Firm Name _____

Phone Number _____

Address _____

Continued on next page...

Permit # _____ Excavation Name _____

Engineer's Seal Below

Please complete the information in this form and return with Annual Inspection Fee, new Reclamation Bond (as applicable), and Roadway Service Life Reduction Fee (as applicable) to:

**Charlotte County
Community Development Department – Excavations
Attn: Diane Clim
18400 Murdock Circle
Port Charlotte, FL 33948**

PLEASE BE ADVISED, regular site visits by the County may occur at any time during the course of the permit without notification.