COST-SHARE FUNDING ELIGIBILITY FORM
TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

APPLICANT ELIGIBILITY

The applicant must meet the following criteria in order to be considered for TCAA Water Management Partnership cost-share funding:

- Is the operation on which the project will be located within the boundaries of the Tri-County Agricultural Area (TCAA) or does it drain to the TCAA? ☑ YES ☐ No
- Has the agricultural operation to be served by the project been in operation for the three previous years? ☑ YES ☐ No
- Is the agricultural operation in compliance with all applicable federal, state, and local laws, rules, and regulations, SJRWMD-issued permits and SJRWMD funding agreements? ☑ YES ☐ No
- As confirmed by FDACS staff, is the agricultural operation enrolled in FDACS best management practices (BMPs) and implementing the practices indicated on the Notice of Intent to implement BMPs and, as applicable, those listed in Rule 5M-4, Florida Administrative Code? ☑ YES ☐ No

BMP confirmation form attached

- Does the landowner/leaseholder have control of the land for at least the anticipated contract period? ☑ YES ☐ No
- Is the applicant willing to have the project undergo water quality, water conservation, and/or yield monitoring, as needed to determine the environmental and production outcomes of the project? ☑ YES ☐ No
- Is the applicant willing to host and participate in educational/demonstration activities on the project site at reasonable times and under reasonable conditions? ☑ YES ☐ No
- Is the applicant willing to consider expanding the scope of the project, provided it proves successful and is economically feasible to do so? ☑ YES ☐ No
- Is the owner (and lessee, if applicable) willing to enter into a legally binding agreement with FDACS, FDEP, or the SJRWMD, as applicable, to receive funds for the project? ☑ YES ☐ No

Applicant name (please print): [Signature]
Applicant signature

Date: 6-8-12

FDACS Office of Agricultural Water Policy
5-25-12
COST-SHARE FUNDING APPLICATION FORM
TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

For Agency Use | Date Conceptual Proposal Reviewed by TST: 4/10/12 | Initial:
For Agency Use | Date Final Application Reviewed by PSP: | Initial:

☑ APPLICANT ELIGIBILITY FORM ATTACHED

TST MEMBERS ASSISTING: David Dinkins (904) 484-6097

1. CONTACT INFORMATION

APPLICANT
Name: ___________________________ Farm Name: ___________________________
Address: _________________________ City, State, Zip: Hastings, FL 32145
E-mail address: ____________________ Telephone: ______________________________

CONTACT OR CONSULTANT - Should all correspondence be sent to this person? ☐ Yes ☐ No
Name: ___________________________ Telephone: (_____) _______________________
Address: _________________________ City, State, Zip: ______________________________
E-mail address: ____________________

PROPERTY OWNER (if other than applicant)
Name: ___________________________ Telephone: _______________________________
Address: _________________________ City, State, Zip: Hastings, FL 32145
E-mail address: ____________________

2. PROJECT/PRACTICE INFORMATION

CHECK THE TYPE OF PROJECT(S) YOU ARE PROPOSING. ☐ Not Applicable
☐ Farm Drip Irrigation ☑ Farm Overhead Irrigation
☐ Farm Enhanced Seepage Irrigation ☑ Irridrain
☐ Irrigation Tailwater Recovery and Reuse ☐ Wet Detention
☐ Irrigation and stormwater runoff recovery for treatment and reuse
☐ Regional Water Reuse ☐ Other: ______________________________

COMPLETE AND ATTACH THE RELEVANT PROJECT DETAIL FORM(S). ☐ Attached ☐ Not Applicable

CHECK THE PRACTICES OR EQUIPMENT BELOW FOR WHICH YOU ARE REQUESTING FUNDING. ☐ Not Applicable

☑ Banding equipment* Related to project? ☐ Yes ☑ No Estimated Cost: $65,000
☑ Pump upgrades w/soil moisture sensors Related to project? ☑ Yes ☐ No Estimated Cost: $15,000
☐ Soil moisture sensors Related to project? ☐ Yes ☐ No Estimated Cost: ______________________________
☐ Other (describe below) Related to project? ☐ Yes ☐ No Estimated Cost: ______________________________

---

1 TST - Technical Support Team; SJRWMD - St. Johns River Water Management District; FDACS - Florida Department of Agriculture and Consumer Services; FDEP - Florida Department of Environmental Protection

FDACS Office of Agricultural Water Policy 5/25/2012
COST-SHARE FUNDING APPLICATION FORM

TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

*Fertilizer applicator uses a 57' boom in which air blows fertilizer through and precisely places it where needed. It will allow fertilizer to be placed near but not in water furrows, reducing nutrient loss.

INDICATE THE EXPECTED BENEFITS OF THE PROPOSED PROJECT/PRACTICES (CHECK ALL THAT APPLY):

☑ Reductions in the offsite movement of nitrogen
☑ Reductions in water use
☑ Reductions in the offsite movement of phosphorus
☑ Reduced operational costs over time
☑ More efficient application/management of fertilizer
☑ Other: Potential reduction in N and P rates due to soil moisture management; less runoff due to less erosion by eliminating water furrows.

WHAT INFORMATION CAN YOU PROVIDE TO DEMONSTRATE THE WATER QUALITY, WATER CONSERVATION, AND/OR CROP PRODUCTION OUTCOMES OF THE PROPOSED PROJECT/PRACTICES?

☑ Record of reductions in N applications (lbs/yr)
☑ Record of reductions in P applications (lbs/yr)
☐ Record of reductions in water use (gals/yr)
☐ MIL follow-up evaluation
☑ Other: Expect 5-10% overall reduction in fertilizer applied.

Do you have a conservation plan that meets Natural Resources Conservation Service criteria?
☐ Yes - Year of Plan: ________ ☐ Under Development ☑ No – but willing to develop plan

Have any proposed projects or proposed practices/equipment been funded by other local, state, or federal programs?
☐ Yes ☑ No If yes, provide funding source(s) and amount(s):

________________________________________________________________________________________

Note: Funding from this program may not duplicate funding from other programs.

3. PROPERTY INFORMATION

County: St. Johns Section(s): 8 Township: 10S Range: 28E

Nearest road/intersection: Lat./Long. 29°38'56.46"N / 81°29'56.05"W

Crop type(s) and growing season(s): Sad, year round.

Size of agricultural operation on which the project/practice will be located: 1,500 acres

Fertilized area on operation: 1200 acres Irrigated area on operation: 1200 acres

Irrigation application rate: 445 million. gallons/year (2011)

Irrigation method/system currently used: Open ditch, seep

Existing water management systems: Field ditch with riser board structures.

The project/practice area is:

FDACS Office of Agricultural Water Policy 5/25/2012
COST-SHARE FUNDING APPLICATION FORM

TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

☐ Owned by applicant  ☑ Leased by applicant  ☐ Applicant has other legal control

☑ Copy of deed, lease, or other legal conveyance is attached. Years of control are __________ - __________.

Tater Farms is owned by the same Principles as Landowner. The written lease is renewable as long as the company operates.
COST-SHARE FUNDING APPLICATION FORM

TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

For project proposals only 🈗

Known Easements: NONE

How will these easements affect and/or be affected by the proposed project? ☐ No Effect
☐ N/A

Water bodies the property drains to and distance from farm:

☐ Lower St. Johns River
☐ Deep Creek
☐ Dog Branch Creek
☐ Mill Creek
☐ Six-Mile Creek
☐ Sixteen-Mile Creek
☐ Other: _________________________

Distance from farm: _______ miles
Distance from farm: 2 miles east via canal #9
Distance from farm: _______ miles
Distance from farm: _______ miles
Distance from farm: _______ miles
Distance from farm: _______ miles
Distance from farm: _______ miles

Describe the drainage to or from other farms.

To other farms: None

From other farms: None

Describe any unique characteristics of your property with regard to water management.

Property drains through canal that flow to Deep Creek.

Other important information: ____________________________
____________________________________________________
____________________________________________________

PROVIDE THE FOLLOWING DOCUMENTS:

☐ Aerial photo depicting property boundaries; water use permit boundaries; well locations; existing surface water bodies; water control structures; and all proposed project components already existing, including pump stations, pipelines, structures, and reservoirs  ☑ Attached

☐ Topographic map (USGS map or other available imagery)  ☑ Attached

☐ If applicable, copy of NRCS conservation plan  ☐ Attached
☐ Not Applicable

☐ Soils map, if not in the provided conservation plan (projects only)  ☑ Attached

☐ NRCS soils report, if not in the provided conservation plan (projects only)  ☑ Attached

FDACS Office of Agricultural Water Policy 5/25/2012

4 of 4
4. Applicant Certification

Applicant Name (please print):

If a business entity, list name registered with the Florida Department of State

☐ Florida Corporation ☐ Florida General Partnership ☑ Florida Limited Liability Company
☐ Florida Limited Partnership ☐ Foreign Corporation/Partnership ☐ Trust
☐ Other: ____________________________

Attach documentation of the status of the business entity to operate in the State of Florida, such as a copy of the last corporate annual report submitted to the Florida Department of State or a Certificate of Status issued by the Florida Department of State.

I hereby certify that the information contained herein is true and accurate, and that I have legal authority to undertake the activities described herein and to execute this application.

________________________________________  6-12-12
Applicant signature                                      Date

Name and title if signing as business entity (please print) __________

Is the applicant the land owner? ☐ YES ☐ NO If “No,” what is the applicant’s relationship to the land owner? ______________________

Complete this part if the applicant is not the property owner:

I hereby certify that the applicant has sufficient legal control of the project area to construct and operate the project.

______________________________  6-12-12
Name of property owner (please print)                             Date

______________________________                             ______________________
Signature of property owner                                    Date
IRRIGATION TAILWATER RECOVERY/REUSE - PROJECT DETAIL FORM
TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

PROJECT DESCRIPTION (Explain where the project will be located on the property and how it will operate):
Install/upgrade risers in Canal #9 to raise water table that drains 320 acres of sod/potato production on seep irrigation. Install pumping station to pull water from canal to irrigate 80 acres of sod.

Identify the wells (District or user IDs) that will be included in the project: 50036 ID 78 and 79

Size of construction/installation area: 2 acres

Size of area to be treated by the project: 160 acres

Existing or proposed location of the reservoir: Hastings Drainage District Canal #9 - East of Keller Road and Issacson Ave.

Size of the existing or proposed reservoir: Acres: 1.5 acres Depth: TBD

Proposed residence time of the reservoir, if applicable: TBD

Proposed pump stations (complete information for each station individually)

1. ☑ New ☐ Replacement Yield (gallons per minute): 800 gpm
   Justification: to reuse water from 160 acres of overhead pivot irrigation water.
   Location: Canal #9 Hastings Drainage District
   Pipeline diameter and length needed to connect into existing irrigation system mainline.
   Diameter: 6" - 8" Length: 100'

2. ☐ New ☐ Replacement ☐ Retrofit Yield (gallons per minute): ___________
   Justification: ____________________________________________________________
   Location: ________________________________________________________________
   Pipeline diameter and length needed to connect into existing irrigation system mainline.
   Diameter: ______________ Length: __________________

3. ☐ New ☐ Replacement Yield (gallons per minute): ___________
   Justification: ____________________________________________________________
   Location: ________________________________________________________________
   Pipeline diameter and length needed to connect into existing irrigation system mainline.
   Diameter: ______________ Length: __________________

Major pump station components (filtration, water treatment, etc.): Pump, pipe, filter
IMPLEMENTATION TIMELINE

Provide an estimated timeline for permitting and construction of the project: Six months from approval and permitting.

IMPLEMENTATION CHALLENGES

Describe any project/practice implementation and management challenges you anticipate, including uncertainties and possible impacts to other properties: Water treatment may be needed to address food safety requirements. None Anticipated.

CONTINUED MAINTENANCE OF PROJECT OR PRACTICE/EQUIPMENT

Describe the continuing management/maintenance needed to ensure that the project functions as designed/intended: Ditch cleaning and pump maintenance.

MONITORING PLAN

☐ Attached  ☑ Under Development

Include a description of the type(s) and length of monitoring that would be employed to determine the water quality, water conservation, and crop production outcomes of this project, as applicable, including baseline or comparison monitoring. (Include optimum monitoring sites marked on map or aerial photo)

ESTIMATED COSTS

Provide a breakdown of estimated project costs, including design, construction, and continuing maintenance. TBD

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Design</td>
<td>$5,000</td>
</tr>
<tr>
<td>Construction</td>
<td>$40,000</td>
</tr>
<tr>
<td>Maintenance</td>
<td>$2,500</td>
</tr>
<tr>
<td>Other (describe):</td>
<td></td>
</tr>
<tr>
<td>Other (describe):</td>
<td></td>
</tr>
<tr>
<td>Total Design/Construction</td>
<td>$45,000</td>
</tr>
</tbody>
</table>
IRRIGATION SYSTEMS - PROJECT DETAIL FORM

TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

Identify the type of irrigation system proposed:

☐ OVERHEAD IRRIGATION - Type of overhead: Center Pivot System length: 1545.67' 
☐ DRIP IRRIGATION ☐ IRRIDRAIN ☐ ENHANCED SEEPAVE

Will a seepage system be used in addition to the system proposed? ☐ YES ☑ NO

PROJECT DESCRIPTION (Explain where the project will be located on the property and how it will operate):

(1) Overhead center pivot with corner attachment to irrigate/fertilize 160 acres of sod; (2) 100 acres of 
   drain tile placed underground in a grid system. Will have control structures in field to maintain desired 
   water table. Excess will drain into end of field ditch to be collected for tailwater recovery. All drainage 
   from project will travel to HDD Canal #9 where we are proposing a tail water recovery system that will be 
   used to irrigate other parts of the farm. Canal #9 drains east to Deep Creek, approximately 2 minutes from 
   the project field.

Identify the wells (District or user IDs) that will be included in the project: 50036 ID 78 (center pivot) and 
50036 ID 79 (irridrain)

Acres to be irrigated: 160 acres w/center pivot; 100 acres w/irridrain Current pump capacity: 1600 gpm

How will you determine the appropriate frequency (# times a day) and duration of irrigation events?

Frequency: Soil moisture sensors
Duration: Soil moisture sensors

If you are incorporating fertilization, how often do you plan to fertilize (# times a day); how much fertilizer 
will be applied with each event? ☐ Not Applicable

Frequency: Fertilize everytime we irrigate.

Amt. of fertilizer w/each event: 5-1 lb of nitrogen/acre

Estimated annual fertilization rate (lbs N/acre/yr): <200 lbs/acre/yr

What measures do you or will you take to manage runoff resulting from irrigation?

☑ Tailwater recovery ☐ Retention/detention ☐ Other (Describe below):

Initially, control structures will be utilized to collect runoff. Additional runoff will be collected in canal #9 for 
irrigation reuse on sod fields. Please refer to Tailwater Recovery/Reuse Project Detail Form.

IMPLEMENTATION TIMELINE

Provide an estimated timeline for permitting and construction of the project: 3 months after permitting 
and approval.

FDACS Office of Agricultural Water Policy 5/25/2012 1
IRRIGATION SYSTEMS - PROJECT DETAIL FORM  
TRI-COUNTY AGRICULTURAL AREA WATER MANAGEMENT PARTNERSHIP

IMPLEMENTATION CHALLENGES

Describe any project/practice implementation and management challenges you anticipate, including uncertainties and possible impacts to other properties: None anticipated

CONTINUED MAINTENANCE OF PROJECT OR PRACTICE/EQUIPMENT

Describe the continuing management/maintenance needed to ensure that the project functions as designed/intended: Center pivot - manufacturer's standard maintenance and repair; Irridrain - anticipate very little maintenance once in place. It will be necessary to keep drain ditch clean to allow for good drainage to tailwater recovery canal.

MONITORING PLAN ☑  □ Attached  ☑ Under Development

Include a description of the type(s) and length of monitoring that would be employed to determine the water quality, water conservation, and crop production outcomes of this project, as applicable, including baseline or comparison monitoring. (Include optimum monitoring sites marked on map or aerial photo)

ESTIMATED COSTS

Provide a breakdown of estimated project costs, including design, construction, and continuing maintenance.

Center Pivot:

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Design</td>
<td>$125,000</td>
</tr>
<tr>
<td>Construction</td>
<td>Design and constr.</td>
</tr>
<tr>
<td>Maintenance</td>
<td>$5,000/yr</td>
</tr>
<tr>
<td>Other (describe): pump upgrades w/soil moisture sensors</td>
<td>$15,000</td>
</tr>
<tr>
<td>Other (describe):</td>
<td></td>
</tr>
<tr>
<td>Total Design/Construction</td>
<td>$140,000</td>
</tr>
</tbody>
</table>

Irridrain:

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Design</td>
<td>$136,000</td>
</tr>
<tr>
<td>Construction</td>
<td>Design and constr.</td>
</tr>
<tr>
<td>Maintenance</td>
<td>$2,500/yr</td>
</tr>
<tr>
<td>Other (describe): retention structure for Irri-drain</td>
<td>$5,000</td>
</tr>
<tr>
<td>Other (describe): retention structure for seep</td>
<td>$5,000</td>
</tr>
<tr>
<td>Total Design/Construction</td>
<td>$146,000</td>
</tr>
</tbody>
</table>
I certify the attached is a true and correct copy of the Articles of Organization of a limited liability company organized under the laws of the state of Florida, filed on October 7, 2003, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number H030000291889. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L030000038249.

Authentication Code: 503A000055010-100803-L030000038249-1/1

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Eighth day of October, 2003

Glenda E. Hood
Secretary of State
ARTICLES OF ORGANIZATION

OF

A Florida Limited Liability Company

ARTICLE 1

NAME

The name of this Limited Liability Company is:

ARTICLE 2

DURATION

The duration of this limited liability company is perpetual from the date of commencement of the limited liability company's existence. The date and time of commencement of the limited liability company's existence is the time of filing of the original articles of organization by the Department of State of the State of Florida.

ARTICLE 3

PRINCIPAL OFFICE AND REGISTERED AGENT

The mailing and the street address of the principal office of the limited liability company is

The name and address of the initial registered agent of the limited liability company is Palmetto Charter Services, Inc., 150 Magnolia Ave., Daytona Beach, FL 32114.

ARTICLE 4

MANAGEMENT

The company is to be a member-managed company. The names and addresses of its Managers are:

Fred F. John, M.
3600 N. A1A, Vero Beach,
Vero Beach, Florida 32963

Emily W. Moore
536 E. Olin, Daytona
Daytona Beach, Florida 32114
At any time while there is more than one Manager, each Manager shall have the authority to act on behalf of the Company without the consent of the other Managers.

ARTICLE 5
CONTINUATION OF BUSINESS

Upon the death, bankruptcy, retirement, resignation, or dissolution of a Member or upon the occurrence of any other event which terminates the continued membership of a Member in the limited liability company, the remaining Members may continue the legal existence and business of the limited liability company if (i) there is at least one remaining Member or a new Member is admitted, and (ii) within 90 days after the occurrence of the event of dissociation, the Members, by a majority in interest vote, consent in writing to the continuation of the business.

ARTICLE 6
ADMISSION OF ADDITIONAL MEMBERS

No person may be admitted as an additional member without the prior written consent of the Members. If such person is admitted, he or she shall be subject to the obligations and limitations in the Operating Agreement of the limited liability company, as amended for the additional members.

IN WITNESS WHEREOF, the undersigned members/managers do hereby execute and acknowledge these articles of organization this ___th day of October, 2003.

[Signature]
Manager
State of Florida

Department of State

I certify the attached is a true and correct copy of the Articles of Organization of TANZA PAPER, LLC, a limited liability company organized under the laws of the state of Florida, filed on October 7, 2003, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number 803000291893. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is L03000038248.

Authentication Code: 403A00055007-100803-L03000038248-1/1

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the Eighth day of October, 2003

[Signature]
Glenda E. Hood
Secretary of State