

**Southwest Florida Water Management District
 2025 Regional Water Supply Plan
 Project Option Form**

A. BASIC INFORMATION							
A-1	Project Name:						
A-2	Organization:						
	Name/title:						
	Email Address:						
	Mailing Address:						
Office Phone: ()				Mobile Phone: ()			
A-3	Contact (if other)						
Name/title:							
Email Address:							
Mailing Address:							
Office Phone: ()				Mobile Phone: ()			
A-4	In what County is this project located?						
<input type="checkbox"/> Citrus <input type="checkbox"/> Charlotte <input type="checkbox"/> DeSoto <input type="checkbox"/> Hardee <input type="checkbox"/> Hernando <input type="checkbox"/> Highlands <input type="checkbox"/> Hillsborough <input type="checkbox"/> Lake <input type="checkbox"/> Levy <input type="checkbox"/> Manatee <input type="checkbox"/> Marion <input type="checkbox"/> Pasco <input type="checkbox"/> Pinellas <input type="checkbox"/> Polk <input type="checkbox"/> Sarasota <input type="checkbox"/> Sumter							
B. PROJECT INFORMATION							
B-1	Project Type:						
<input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Reclaimed Water <input type="checkbox"/> Stormwater <input type="checkbox"/> Conservation							
Gallons per day conserved/alternative water supplied: _____							
B-2	Project Description: <i>Objectives, benefits, purpose, and goals</i>						
Project Estimated Timeline:							
<i>Check all that apply and supply requested dates (month/day/year)</i>							
Current % Complete:							
	Planning		%	Start Date:		Completion Date:	
	Design		%	Start Date:		Completion Date:	
	Permitting		%	Start Date:		Completion Date:	
	Bidding		%	Start Date:		Completion Date:	
	Construction			Start Date:		Completion Date:	
	Future Phases			Start Date:		Completion Date:	
	Other			Start Date:		Completion Date:	

	Project Partners and Funding: a. Multi-jurisdictional Project: <i>Identify partners and include the percent of funding to be contributed by each partner, if known</i>
	b. Funding Sources: <i>Identify funding sources, including State or Federal appropriations or grant monies, municipal bonds, etc. Identify source of Organization's funding.</i>

C. PROJECT COST INFORMATION

C-1	Project Funding:	
	a. Total estimated project cost: <i>Includes capital, construction, land acquisition, planning, permitting & design costs</i>	\$
	b. Construction cost:	\$
	c. Organization's share:	\$
	d. Organization's estimated annual operation & maintenance costs:	\$
	e. Estimated service life of components:	years
	f. Year of cost basis: <i>For future escalation estimates</i>	

Name (print): _____

Signature: _____

Title: _____

Date: _____