STATE OF FLORIDA FUNDING CONSIDERATION
ALTERNATIVE WATER SUPPLY PROJECT APPLICATION
Fiscal Year 2027

2027

There are eight (8) tabs in SFWMD's AWS Cooperative Funding Program Application.
You must complete all eight (8) tabs for your application to be considered, "Complete."
All submittals must be uploaded at https://www.sfwmd.gov/doing-business-with-us/coop-funding by February 26, 2026, at 4:00 PM. Please refer to the example applications located on the website for help in completing your application. Applications must be submitted in Excel format and not PDF.

For each tab, any and all cells this color require an input.
If a question does not apply to your project, enter N/A.
Do not leave any cells this color blank.

Continue to scroll down.

Project Header Information

1	Project Name	RO Wellfield Expansion – Phase 2 Lower Floridan Aquifer Well PW-15 and PW-16
2	Applicant	City of Springfield Utilities
3	Authorized Representative	Laura Jones
4	Address	123 North Harbor Drive
5	City	Springfield
6	Zip code	33333
7	Telephone	954-555-1234 ext. 1098
8	Email	ljones@springfield.com
9	Project Manager (if different)	Mike Smith
10	Address	123 North Harbor Drive
11	City	Springfield
12	Zip code	33333
13	Telephone	954-555-1234 ext. 2835
14	Email	msmith@springfield.com
15	Federal ID Number	59-6000000
16	Project Latitude (decimal degrees)	26.493675
17	Project Longitude (decimal degrees)	-80.329744
18	Phase Construction Cost ($)	$1,500,000
19	Requested State Funding ($)	$500,000
20	Third-Party Match Funding ($)	$0
21	Total Capital Cost ($)	$3,750,000
22	Applicant's Match Funding ($)	$1,000,000
23	State Appropriation Funding ($)	$0
24	SFWMD Planning Region	Lower East Coast
25	Municipal area (area[s] benefited; list all)	Springfield City
26	County	Palm Beach
27	Constructed on state-owned land Yes/No	No
28	AWS Project Type (reclaimed, brackish, ASR, etc.)	Brackish water
29	Multiyear Project? Yes/No	Yes
30	Anticipated Construction Start Date	11/1/2026
31	Anticipated Completion Date	8/1/2027
32	Phase Capacity (mgd) (within 1-2 years)	2.00
33	Confirm: Will THIS PHASE of the project create additional capacity? Yes/No	Yes
34	Total Capacity (mgd) (upon full project completion)	5.00
35	Reclaimed only - Distribution Capacity (mgd)	N/A
36	Storage Capacity, if applicable (mg)	N/A

Are other agencies contributing funding to this project?

37	Yes / No	No
38	If yes, source(s):	N/A
39	If yes, amount(s):	N/A

Does any contractor or other affiliate of the applicant have a financial interest in this project, the property associated with this project, or with any party that may profit financially from this project?

40	Yes/No	No
41	If yes, list the parties and interests:	N/A

Is the project part of your institution's capital/facilities work program?

42	Yes/No	Yes

If applicable, provide the name of the related project as it appears in the water supply plan (WSP) associated with the proposed work. Projects can be found in the relevant WSP at https//www.sfwmd.gov/our-work/water-supply.
If the project is not included in a WSP, but if it is included in the Water Supply Facilities Work Plan and/or Capital Improvement Schedule of the applicable local government's Comprehensive Plan indicate the project name below.
Enter Name of Water Supply Plan Project Title or Local Government Project Title below.

43	"Springfield Brackish Water Production Well Expansion – Phases 2 and 3": Lower East Coast Water Supply Plan Update 2024, page E-6; and the City of Springfield Florida Capital Improvement Program Budget FY 2024-2027, project number P8901.
	Name of Water Supply Plan Project Title or Local Government Project Title (above)

Project Header Sheet

	This is a State of Florida reimbursement program with the entire project scope expected to be completed within the funding period (begin on or after October 1, 2026), regardless of amount awarded. There is no guarantee the applicant will be awarded the amount requested. Are budgeted funds available to pay for the entire scope of the project?		
44	Yes/No	Yes	
	Does the applicant understand that if, for any reason, the project scope is not 100% completed as outlined in the scope of work, the funding amount may be reduced to match the original percentage of funding in the contract that was based on the estimated construction cost provided in the application?		
45	Yes/No	Yes	
	Does the applicant understand that funds are only for applicable expenses incurred during the funding period?		
46	Yes/No	Yes	**Continue to scroll down.**
	Does the applicant have a Water/Consumptive Use Permit?		
47	Yes/No N/A	Yes	
48	If yes, provide permit number:	50-1234-W	
	Local governments: Does the applicant have an irrigation ordinance consistent with Chapter 40E-24, Florida Administrative Code (F.A.C.) (Mandatory Year-Round Landscape Irrigation Conservation Measures)?		
49	Yes/No N/A	Yes	
50	If yes, provide ordinance number:	Ch. 14 Article III, Sec. 19.82	
	Does the applicant understand if the irrigation ordinance above does not fully comport with Chapter 40E-24, F.A.C., the application will be deemed ineligible for funding consideration?		
51	Yes/No N/A	Yes	
	Local governments: Does the applicant have an approved Water Supply Facilities Work Plan pursuant to Sections 163.3177 and 163.3184, Florida Statutes (F.S.)?		
52	Yes/No N/A	Yes	**Continue to scroll down.**
53	If yes, Approval/Adoption date	10/14/2025	
	If yes, ordinance number:	City Ordinance Ch. 11. Article 2, Sec (10)-7(c)	
	If "no" selected above: Does the applicant have a proposed Water Supply Facilities Work Plan to be approved before February 26, 2026?		
54	Yes/No N/A	N/A	
55	If yes, Approval/Adoption date	-	
56	If yes, ordinance number:	City Ordinance Ch. 11. Article 2, Sec (10)-7(c)	
	Does the applicant understand if the Water Supply Facilities Work Plan above does not meet Sections 163.3177 and 163.3184, F.S., the application will be deemed ineligible for funding consideration?		
57	Yes/No N/A	Yes	
	Is the applicant in a Rural Economic Development Initiative (REDI) Community?		**Continue to scroll down.**
58	Yes/No	No	
	Has this project received previous SFWMD or state funding?		
59	Yes/No	Yes	

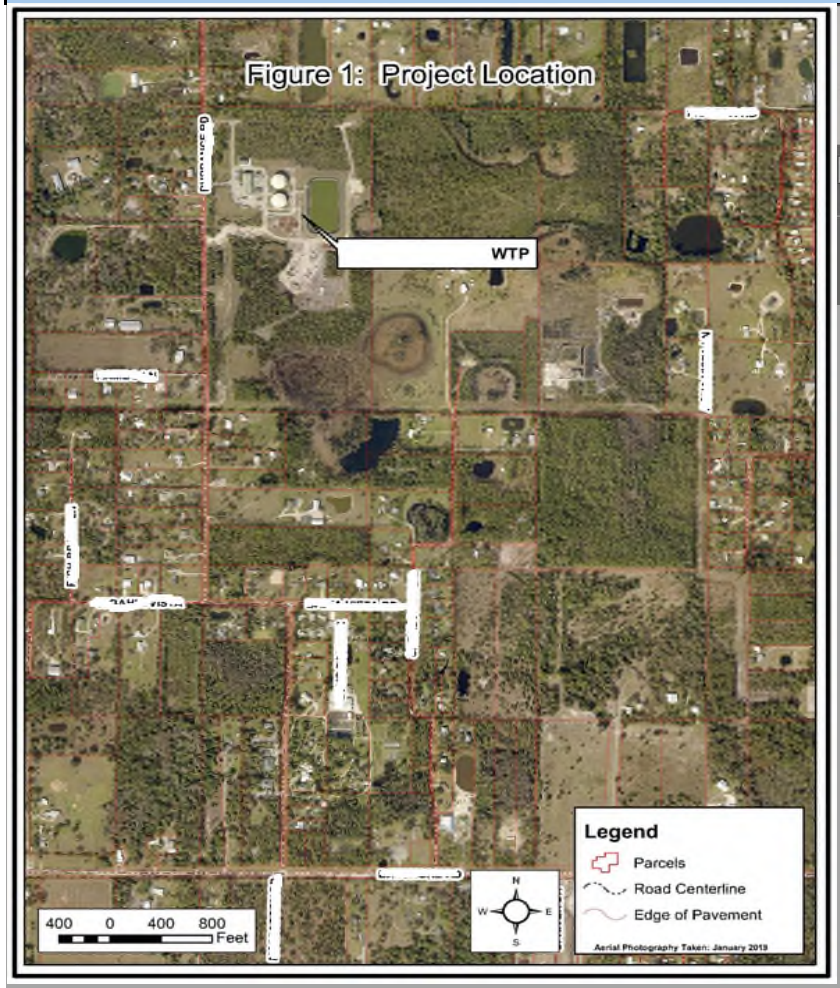
If yes, provide the following information:

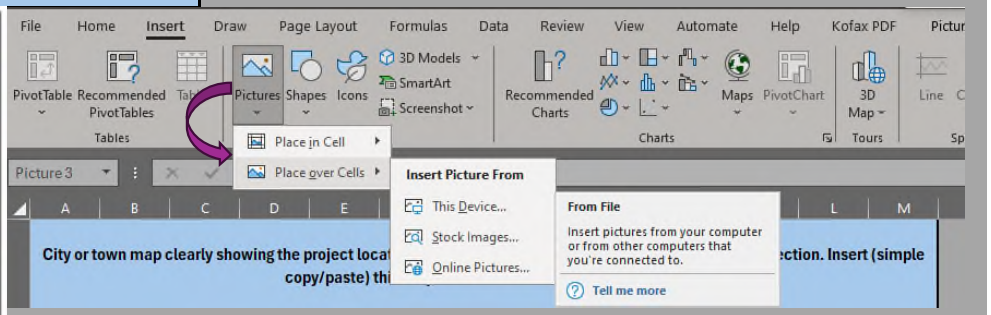
	Contract Number	Year Awarded	Amount Awarded	Award Amount Spent
	4600001234	2016	$400,000.00	$400,000.00
60				

Continue on to the Project Figures tabs. (There are two.)

Figure 1. Project Location
City or town map clearly showing the project location in relation to the nearest major street or road intersections.

Insert (simply copy/paste) the map into this tab as a JPEG, PNG, or GIF using the image at the right as a guide. Otherwise,
upload the image of your map directly into the Cooperative Funding Program Application Portal.

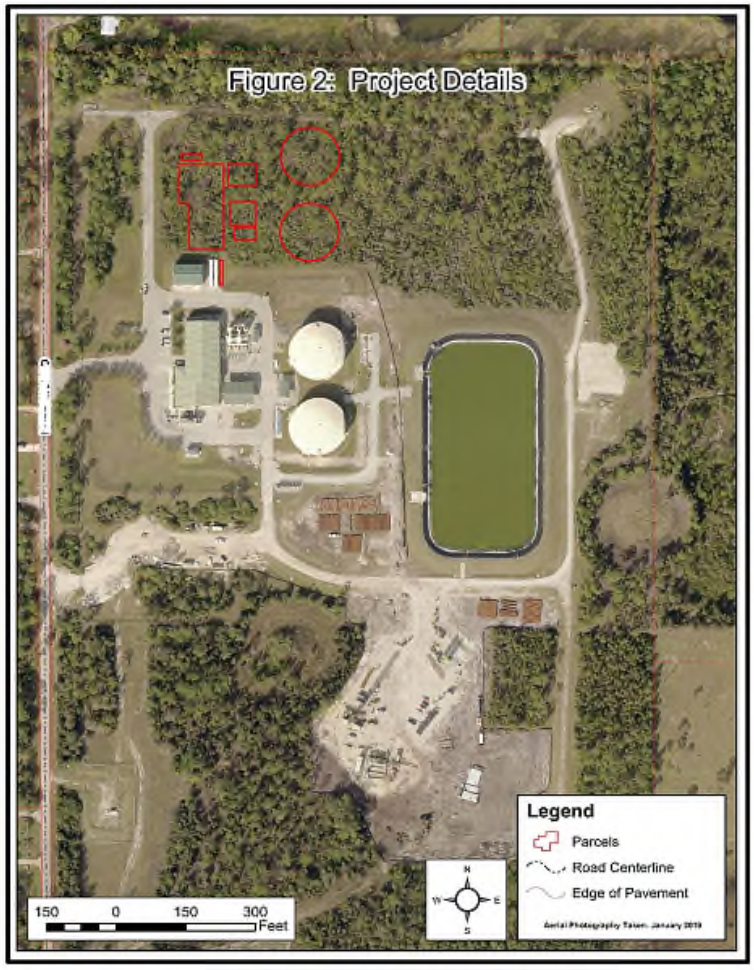


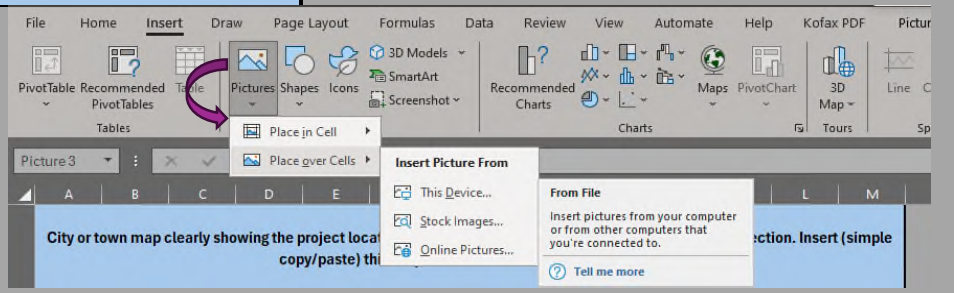


Continue on to the Project Figure 2 Tab.

Figure 2: Project Details.
Project-level map showing sufficient detail depicting the proposed project (e.g., show a proposed pipeline between two intersections bounding the project; show a plant layout with the proposed project phase components highlighted, such as a storage/chlorination tank).

Insert (simply copy/paste) the map into this tab as a JPEG, PNG, or GIF using the image at the right as a guide. Otherwise,
upload the image of your map directly into the Cooperative Funding Program Application Portal.





Continue on to the Project Description & SOW Tab.

	Short Project Description Provide two to three sentences describing the project for which funding is being requested (what will be constructed during the funding period).	
	TIP: Hold Alt and hit Enter to start a new paragraph.	TIP: Hold Alt and hit Enter to start a new paragraph.
1	The City of Springfield (City) will be installing two brackish production wells in FY27. This is Phase 2 of the City's Reverse Osmosis (RO) wellfield expansion. These proposed wells are located north and west of the RO Water Treatment Plant (WTP) stretching along Conner Highway. The project includes the 24-inch diameter pipeline connecting the two production wells to the WTP. The Floridan aquifer system (FAS) wells will provide an additional 2.0 million gallons per day (mgd) of capacity to supply the City's RO WTP.	For each tab, any and all cells this color require an input. If a question does not apply to your project, enter N/A. Do not leave any cells this color blank.

	Statement of Work This section will be used to create the contract document if the project is selected for funding. Provide detail on your project as follows:	
	Introduction/Background (up to 6 paragraphs)	Continue to scroll down.
	TIP: Hold Alt and hit Enter to start a new paragraph.	TIP: Hold Alt and hit Enter to start a new paragraph.
2	The City provides potable water service to approximately 10,000 accounts and approximately 30,000 water customers. The existing Springfield Wellfield, consisting of 11 brackish aquifer wells, is located both within the City's RO WTP property and along various easements and properties in the City. The two proposed FAS wells (PW-15 and PW-16) are expected to provide an additional 2.0 mgd of brackish water to the RO WTP. The City will be installing PW-15 and PW-16 as part of Phase 2 to be completed in FY27, followed by an additional three brackish production wells in Phase 3 by the end of FY29. All proposed wells are located north and west of the WTP stretching along Conner Highway. Existing wells are located at the WTP site and southwest from the plant. These future wellfield expansions and an expansion of the City's RO WTP by an additional 5.0 mgd are needed to address future growth projections. RO WTP expansion will be necessary when the existing plant's reliable capacity is expected to be exceeded beginning in 2028 as documented in the most recent Master Plan.	

	Project Objectives (1 - 2 sentences)	Continue to scroll down.
	TIP: Hold Alt and hit Enter to start a new paragraph.	TIP: Hold Alt and hit Enter to start a new paragraph.
3	The objective of the brackish water wellfield expansion is to provide additional water supply for the existing RO WTP plant and, in part, a future expansion. The addition of these wells will help to diversify the City's water sources by expanding the use of brackish water while reducing the long-term use of its surficial aquifer wellfield. Phase 2 is intended to increase the brackish wellfield capacity by 2.0 mgd.	

Detailed Scope of Work (up to 6 paragraphs - what work will be constructed during the funding period)
TIP: Hold Alt and hit Enter to start a new paragraph.
The scope of work includes two new production wells (Phase 2) drilled into the brackish FAS and connected back to the RO WTP via 5,000 linear feet of 24-inch diameter raw water pipeline. The wells and accompanying pipeline will be constructed in one contract, and the project is expected to be substantially complete in August 2028. The construction contract will be for drilling two FAS wells, each with a final diameter of 16-inch and be approximately 1,000 feet deep. The production well identifiers, per the City's water use permit are PW-15 and PW-16. Simultaneously with the drilling of the wells, the pipeline to the Springfield RO WTP will also be constructed. Starting at the RO WTP there will be approximately 5,000 linear feet of 24-inch diameter High Density Polyethylene (HDPE) pipe installed along the following route: from the RO WTP northwest along Conner Highway to the locations of proposed wells PW-15 and PW-16 (see Figures 1 and 2).

4

Continue to scroll down.

TIP: Hold Alt and hit Enter to start a new paragraph.

Table 1. – Project Breakdown

	FY27	FY28	FY29	FY30	FY31 and Beyond	Project Totals
Project Phase (e.g., Phase 1, 2, 3, etc.)	Phase 2	Phase 3a	Phase 3b	N/A	N/A	**Not applicable**
Major Deliverables (brief description)	2 new production wells and raw main	1 new production well	2 new production wells	N/A	N/A	**Not applicable**
Construction Cost ($)	$1,500,000	$750,000	$1,500,000	$0	$0	**$3,750,000**
Planning/Design/Engineering/Other Costs ($)	$200,000	$225,000	$0	$0	$0	**$425,000**
Total Cost ($)	$1,700,000	$975,000	$1,500,000	$0	$0	**$4,175,000**
Capacity Water Made Available (mgd)[1]	2.00	1.00	2.00	0.00	0.00	**5.00**

[1] Include capacity water made available only in the year the phase or project becomes operational.

5

Confirm the fiscal years over which this project has/will span.	FY27-29
Confirm the TOTAL number of years to complete this project.	3

6

7

Continue to scroll down.

Table 2. – Deliverables Schedule
(See Examples of Deliverables descriptions BELOW this table.)

Task No.[1]	Deliverable(s) (List major tasks to be completed. Add lines as needed.)	Expected Start Date	Expected Completion Date	Construction Cost ($)
1	Drill Production Well PW-15, 16-inch diameter, approximately 1,000 feet deep	11/15/2026	3/15/2027	$550,000
2	Drill Production Well PW-16, 16-inch diameter, approximately 1,000 feet deep	2/1/2027	8/15/2027	$550,000
3	Install 5,000 feet of 16-inch diameter HDPE pipeline along Conner Highway from well sites to WTP	3/1/2027	8/15/2027	$400,000
			Total[2]	**$1,500,000**

8

[1] Applicant will be required to submit final vendor bid and/or contract documents and quarterly status reports, if awarded funding.

[2] Total deliverable costs should match the information in **Table 1** and the description in the Detailed Scope of Work above. Deliverables should be descriptive (e.g., number and size of pumps, length, diameter, and location of pipelines) to identify what work is being completed and funding requested.

Table 2. – Deliverables Examples

Task No.[1]	Deliverable(s) (List major tasks to be completed. Add lines as needed.)	Expected Start Date	Expected Completion Date	Construction Cost ($)
Correct:	Construct Floridan Well F-3, 16-inch diameter to approximately 950 feet below land surface.	11/15/2026	5/31/2027	$3,000,000
Incorrect:	Floridan well construction	2026	2027	$3,000,000
Correct:	Construct approximately 1,300 linear feet of 20-inch reclaimed water main from I-drive to SR-80.	2/2/2027	6/30/2028	$1,500,000
Incorrect:	Install reuse mains	2027	2028	$1,500,000

Continue on to the Project Benefits Tab.

TIP: Hold Alt and hit Enter to start a new paragraph.

	Regional Benefits
	Is the project going to be implemented by a multijurisdictional water supply entity or regional water supply authority?
1	Yes/No: No
	If yes, please provide the name of the entity(ies).
2	N/A

	Resource Benefits
	What is/are the traditional water supply resource(s) in the area? This is typically a freshwater source, such as the Sandstone aquifer (in the Lower West Coast), surficial aquifer system, Biscayne aquifer, or the Upper Floridan aquifer.
3	The surficial aquifer and the Lower Tamiami aquifer.
	Are any of these sources considered constrained?
4	Both the surficial aquifer and the Lower Tamiami aquifer are constrained in this part of the county.
	What is/are the applicant's permitted water supply resource(s) (e.g., Biscayne aquifer, Floridan aquifer system, surficial aquifer system, Sandstone aquifer, Upper Floridan aquifer, Lower Floridan aquifer)?
5	The surficial aquifer and the Lower Tamiami aquifer.
	What is/are the resource(s) affected by this project (e.g., reclaimed water, an aquifer storage and recovery system, Lower Floridan aquifer, other nontraditional aquifer)?
6	Lower Floridan aquifer
	Does the project contribute to AWS development in areas where traditional water supply sources are constrained (e.g., restricted allocation areas)?
7	Yes/No/Unknown: Yes

	Benefits Waterbody with an Adopted Minimum Flow or Minimum Water Level (MFL)
	Does this project support an MFL, water reservation, and/or restricted allocation area?
8	Yes/No/Unknown: Yes
	If applicable, list the MFL, water reservation, and/or restricted allocation area this project supports, if known.
9	The regional water availability rule and the Everglades MFL.
	Does the project reduce dependence on traditional resources? If so, please describe.
10	Yes/No: Yes
11	The addition of wells drawing from the Lower Floridan aquifer system will reduce demand on the surficial aquifer system.

For each tab, any and all cells this color require an input. If a question does not apply to your project, enter N/A. Do not leave any cells this color blank.

TIP: Hold Alt and hit Enter to start a new paragraph.

Continue to scroll down.

Continue to scroll down.

	Other Environmental Benefits		
	In addition to water supply benefits, **does the project provide complementary benefits** such as water conservation, flood protection, resiliency, drought conditions, saltwater intrusion, sea level rise, green infrastructure, and/or recreational benefits? If so, please explain.		
12	Yes/No	No	
13	N/A		
	In addition to water supply benefits, does the project provide any **water quality benefits**? If yes, explain below.		
14	Yes/No	No	
15	N/A		
	Are you able to **quantify the total phosphorus (TP) or total nitrogen (TN) reductions** in pounds per year (lb/yr) or removal efficiencies? Provide your calculations.		
16	Yes/No	No	
17	TP reduction (lb/yr)		
18	TN reduction (lb/yr)		
19	N/A		

For each tab, any and all cells this color require an input. If a question does not apply to your project, enter N/A. Do not leave any cells this color blank.

Continue to scroll down.

TIP: Hold Alt and hit Enter to start a new paragraph.

Ocean Outfalls

Does the project implement reuse which assists in the elimination of domestic wastewater **ocean outfalls**, as provided in Section 403.086(10), F.S.? **If yes, answer the follow-up questions below.**

20 Yes/No: No

Is your utility/local municipality directly responsible for meeting reclaimed water requirements under the Ocean Outfall Legislation (OOL)?

21 Yes/No N/A: N/A

Is your utility/local municipality part of a local agreement or partnership with another utility/local municipality that must meet reclaimed water requirements under the

22 Yes/No N/A: N/A

Select the facility that is part of this project which is directly responsible for meeting reclaimed water requirements under the OOL from this dropdown menu below.

23 Facility Name: N/A

Explain how your utility/facility is affected by the OOL.

24 N/A

Explain how this project assists in the elimination of domestic wastewater ocean outfalls.

25 N/A

Is the utility/local municipality associated with this project and affected by the OOL in full compliance with its reclaimed water requirements under the OOL.

26 Yes/No N/A: N/A

If the utility/local municipality associated with this project and affected by the OOL is not in full compliance with its reclaimed water requirements under the OOL, explain the deficiency. Discuss/explain if a waiver or other agreement has been granted by the Florida Department of Environmental Protection which delays the deadline for reuse implementation and/or changes the amount of reuse required to satisfy the mandated OOL requirements.

27 N/A

Pursuant to Section 373.707(9)(a-d), F.S., **is reclaimed water metered for all users**?

28 Yes/No N/A: N/A

Does the utility have a **rate structure based on *actual use* of reclaimed water**? If no, **what is the basis for charged rates**?

29 Yes/No N/A: N/A | If no:

Does the utility have **education programs** in place to inform the public about water issues, **water conservation**, and the importance and **proper use of reclaimed water?** If yes, provide a link.

30 Yes/No N/A: N/A | **Link>>**

Continue on to the Project Readiness & Permitting Tab.

Please clearly and briefly answer the following questions and provide supporting information.

Have the project design and bid drawings been completed?

1	Yes/No	Yes	
2	If yes, date:	2/1/2026	
3	If no, anticipated date:		

Has the contractor been selected?

4	Yes/No	No	
5	If no, anticipated date:	10/1/2026	

Have all land purchases, agreements, rights-of-way, etc. been executed?

6	Yes/No	No

If no, explain below.

7 City Council acceptance of purchase agreement for PW-15 and PW-16 is scheduled for 8/25/26.

Have all other necessary items to start construction been completed?

8	Yes/No	No

If no, explain below.

9 Updated SFWMD Water Use Permit has been applied for and is nearing completion. Other permit applications not completed or submitted yet.

For each tab, any and all cells this color require an input. If a question does not apply to your project, enter N/A. Do not leave any cells this color blank.

Continue to scroll down.

In Table 3, list all relevant permits required to start or continue construction.

Table 3. – Permits

	Agency	Permit No.	Permit Type (Water/Wastewater, Environmental Resource Permit, Consumptive Use Permit, Building)	Permit Obtained? Indicate with an "X"		Permit Date (expected date if not obtained yet)
				Yes	No	
10	SFWMD	#50-0024-W	Water Use	X		
	Springfield Development Service	Not issued	Development Order		X	3/15/2026
	FDEP	Not issued	Environmental Resource Permit		X	3/15/2026
	FEMA Floodplain	Not issued	No Rise Certificate		X	3/15/2026
	Palm Beach County Natural Resources	Not issued	Vegetation Removal		X	3/15/2026
	Palm Beach County Dept of Transportation	Not issued	Right-of-Way		X	3/15/2026
	Palm Beach County Development Service	Not issued	Fencing		X	3/15/2026

Continue on to the Cost-Effectiveness Tab.

Cost-Effectiveness Calculator

The District's AWS CFP Cost-Effectiveness Calculator is meant to provide a uniform metric across all projects to describe the quantity of water supplied by the project compared to its construction cost. If you need assistance, contact Stacey Payseno at spayseno@sfwmd.gov or 561-682-2577.

The table below is populated automatically based on the Applicant's entries on previous tabs.

Entity Name	Project Name	Total Water Created by this Project (mgd)	Will this Phase Create Additional Capacity? (Yes/No)	Total Water Created per Day for THIS Phase (mgd)	Full Project Completion Years	Phase Capital Cost	Cost Effectiveness ($/kgal)
City of Springfield Utilities	RO Wellfield Expansion – Phase 2 Lower Floridan Aquifer Well PW-15 and PW-16	5.00	Yes	2.00	3	$1,500,000	$0.17

All projects will be considered to have a 30-year service life and a discount rate of 7.25%.

If your calculator shows an error, go back to the **Project Header Sheet** to the three questions shown below. Be sure you have entered numbers in questions **32** and **34** (rows 51 and 53).

Phase Capacity (mgd) (within 1-2 years)	2.00
Confirm: Will THIS PHASE of the project create additional capacity? Yes/No	Yes
Total Capacity (mgd) (upon full project completion)	5.00

Continue on to the Ancillary Questions Tab.

Miscellaneous Questions

In the table below, list the reclaimed water users who will connect to the proposed reclaimed water project, if applicable.

	Name	User Demand (mgd)	Is an agreement executed (Y/N)?	Estimated connection date
1				

For each tab, any and all cells this color require an input. If a question does not apply to your project, enter N/A. Do not leave any cells this color blank.

ATTENTION ALL APPLICANTS:

The following should be provided in electronic format, such as shape files or AutoCAD® to aws-reusecoordinator@sfwmd.gov.

DO NOT upload these files with your application.

Please Note:
- Files should be editable.
- Indicate if each file has been provided.
- If it has not been submitted with this application, indicate the date by which it will be submitted.

	File	Submitted? Yes/No	Anticipated submission date (if not submitted with this application)
2	Existing and future wastewater AND potable service area boundaries.	Yes	
3	Existing and proposed reclaimed water distribution lines and distribution areas, if applicable.	Yes	
4	Existing and proposed reclaimed water end users, if applicable.	Yes	
5	Existence and extent of any Mandatory Reuse Zones within the service area (include ordinance number), if applicable.	Yes	

DO NOT upload these files with your application.

These files should be provided in electronic format, such as shape files or AutoCAD® to aws-reusecoordinator@sfwmd.gov.

DO NOT upload these files with your application.

These files (above) should be provided in electronic format, such as shape files or AutoCAD® to aws-reusecoordinator@sfwmd.gov.

Continue to scroll down.

Ancillary Question (Required)

	This section includes additional information requested by the FDEP.			
	Is this project a continuation of an existing agreement with the FDEP or SFWMD?			
6		Yes/No	No	
7	If yes, provide the FDEP or SFWMD Agreement Number:			**Continue to scroll down.**
	Project delivery method:			
	Indicate whichever best applies: Design-Bid-Build / Design-Build / Construction Management At-Risk / Progressive Design-Build / Other			
8	Design-Bid-Build			
	Is the project geographically located within an FDEP-approved Restoration Plan (i.e., Basin Management Action Plan or Reasonable Assurance Plan) area?			
	The link below can be used as an interactive map to identify the BMAP status for the project:			
	https://floridadep.gov/dear/water-quality-restoration/content/impaired-waters-tmdls-and-basin-management-action-plans			
9	Yes/No	No		
	If yes, what is the name of the Restoration Plan: Enter text below.			
10	N/A			
	If the project is geographically located within a Restoration Plan area, will the project be identified with a project number on the Statewide Annual Report? The following link is for the Statewide Annual Report:			**Continue to scroll down.**
	https://floridadep.gov/dear/water-quality-restoration/content/statewide-annual-report			
11	Yes/No	No	If yes: Project Number:	
12			Unique ID:	

	Project Background Questions		
13	What is the water-related issue?	Projected population growth for the City will increase demands for potable water. However, additional withdrawals from the surficial aquifer wellfield are prohibited as per the Regional Water Availability Rule adopted in 2007, which limits increases in surface water and groundwater withdrawals above base conditions permitted as of April 1, 2006.	**TIP: Hold Alt and hit Enter to start a new paragraph.**
14	Why is the water-related issue a problem?	Without this project the City stands to jeopardize the sustainable yield of the surficial aquifer and may fail to meet future demands.	
15	How will this project provide a solution to the problem?	This project will diversify the City's water sources by expanding the use of brackish water while reducing the long-term use of its surficial aquifer wellfield.	
16	What water-related benefits will result from the completion of this project?	Water-related benefits of this project include increased efficient use of local water resources; diversification of water resources; and reduced use of the surficial aquifer wellfield.	
16	Will this project result in a fully completed (operational) project? Yes / No	Yes	
17	Will a Florida Licensed Professional Engineer be able to certify work completed?	Yes / No N/A	Yes
18	Will a Florida Licensed Professional Geologist be able to certify work completed?	Yes / No N/A	Yes

Congratulations! You have reached the end of the FY27 AWS Cooperative Funding Program Application.
All submittals must be uploaded at https://www.sfwmd.gov/doing-business-with-us/coop-funding by February 26, 2026, at 4:00 PM.
Please refer to the example applications located on the website for help in completing your application.

Applications must be submitted in MS Excel format, NOT pdf.