



South Florida Water Management District SPECIAL USE APPLICATION AND LICENSE

(To be completed by Applicant)

Applicant's Name		
Activity leader (for group)		
Address		
Telephone Number (including area code)		
E-mail Address		
Request permission to access		
For the purpose of		
Date(s)	From:	To:
Number in party		
Number of vehicles		

(for District use only)

License issued on	
License effective on	
License void on	
Lock combination	

District Representative

Name

Title

Phone