# HID Credit Application Form (v. 2023)

To receive an HID reservation letter and a credit transaction form please provide the following information by emailing this form to [ever\_hid\_credit\_application@nps.gov](mailto:ever_hid_credit_application@nps.gov) Applications sent to alternate email addresses will **NOT** be processed.

Date:

1. What is the project name as shown on the regulatory permits?
2. Indicate the regulatory agencies with jurisdiction on your project (ACOE, Miami-Dade County, SFWMD, FDEP, Broward County). It is the Permittee’s responsibility to verify which regulatory agencies have jurisdiction over the project.

Army Corps of Engineers (ACOE)

Florida Department of Environmental Protection (FDEP)

FDEP State Assumption 404 Permit

Miami-Dade County DERM

Broward County

South Florida Water Management District (SFWMD)

Other (Please Indicate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Provide the application or permit numbers for each of the regulatory agencies with jurisdiction on your project. In order to reserve credits, applicants must have at least one permit or application number. Applicants must provide to the HID electronic copies of the regulatory permits showing the mitigation requirements in UMAM, when they are received. **Note**: Application and permit numbers are different.

| **Agency** | **Application or Permit Number** |
| --- | --- |
| Army Corps of Engineers |  |
| Florida Department of Environmental Protection (FDEP) |  |
| FDEP State Assumption 404 Permit |  |
| Miami-Dade County DERM |  |
| Broward County |  |
| SFWMD |  |
| Other (Please indicate) |  |

1. Provide the Miami-Dade County/Broward County property folio number(s) belonging to the project.
2. Provide the section, township and range information belonging to the project.

Section:

Township:

Range:

1. Provide an exact location description of the property.
2. What is the total number of Federal UMAM credits, as shown on the ACOE Federal permit that are required for this project?
3. What is the total number of State UMAM credits, as shown on the FDEP State permit or FDEP State assumption 404 permit that are required for this project?
4. What is the total number of County UMAM credits, as shown on the County (SFWMD, DERM, Broward) permit that are required for this project?
5. Between questions #7, #8 and #9 above, what is the highest mitigation credits that you are requesting the HID to reserve for the project?
6. Do any one of the permits or application #s for this project apply to other reservations made at the HID? If yes, provide the HID reference number (For example: HID 2006-18).
7. If this current application is a modification to a pre-existing reservation, please indicate the HID reference number assigned to that reservation (For example: HID 2006-18).
8. What is the name, address, phone number, and email address of the consultant arranging to purchase the credits (if applicable)?

Name:

Address:

Phone Number:

Email Address:

1. What is the name, address, phone number, and email address of the individual or business on the permits and permit applications for whom the reservation is being made?

Name:

Address:

Phone Number:

Email Address:

1. Name and email of the individuals issuing payments to the National Park Foundation (NPF) and who would be receiving the receipts from the NPF?

Name:

Email Address: