

CERTIFICATION OF FINANCIAL RESPONSIBILITY FOR LOCAL GOVERNMENT

Brevard County

_____, a unit of local government of the State of Florida, hereby certifies that it has unconditionally obligated itself to have the financial resources necessary to close, plug, and abandon its underground injection well(s) and related monitoring wells, as required by Chapter 62-528, Florida Administrative Code. It is further understood that the cost estimate to conduct plugging and abandonment, established on January 17, 2025, shall be updated thirty (30) months after the date of permit issuance and this obligation shall incorporate accumulated inflation costs. An increase exceeding 10 percent compared with the amount stated below shall require submission of an updated certification form.

Injection Wells and Monitoring Wells Covered By This Agreement:
(attach additional sheet if necessary)

Facility Name: South Brevard County WTP and WRF
Facility Address: _____
Facility Contact: Edward Fontanin
Phone Number: (321) 633-2091
Latitude/Longitude of Injection Well(s): See attachment
Current Permit Number: NA
Current Plugging and Abandonment Estimate: \$900,000
(total for all injection and monitoring wells)

It is hereby understood that the cancellation of this certification may not take place without the prior written consent of the Secretary of the Florida Department of Environmental Protection.

NOTARY: See Next Page

(Signature)

(Print Name)

(Title)

(Date)

Notary Form

State of Florida

County of: _____

Sworn to (or affirmed) and subscribed before me this ____ day of _____, _____

by _____,
(Name of person making statement)

☐ Personally known to me

OR

☐ Produced the following identification _____

Notary Signature

Print, Type, or Stamp Commissioned Name of Notary Public

Apply Seal of Notary Public below State of Florida