# WATER QUALITY IMPACT EVALUATION CHECKLIST

#### **PROJECT INFORMATION PART 1:** SR 408 East Extension From SR 50 to SR 50/SR 520 Intersection **Project Name: Orange County** County: FM Number: CFX Project Number 408-254 Federal Aid Project No: NA This approximately seven mile eastern extension of SR 408 would **Brief Project Description:** terminate in the vicinity of the SR 50/SR 520 interchange. This project establishes a new roadway corridor south of SR 50. **PART 2:** DETERMINATION OF WQIE SCOPE

Does project discharge to surface or ground water? Yes 
No

Does project alter the drainage system?

Is the project located within a permitted MS4? Name:

If the answers to the questions above are no, complete the applicable sections of Part 3 and 4, and then check Box A in Part 5.

## PART 3: PROJECT BASIN AND RECEIVING WATER CHARACTERISTICS

| Surface Water   |                                     |           |                                    |  |  |  |
|---|-------------------------------------|-----------|------------------------------------|--|--|--|
| Receiving water(s) names:   | Econlockhatchee Rive<br>Tributaries | r and its |                                    |  |  |  |
| Water Management District: SJRWMD   |                                     |           |                                    |  |  |  |
| Environmental Look Around meeting date:/ <u>N/A</u> /<br>Attach meeting minutes/notes to the checklist. |                                     |           |                                    |  |  |  |
| Water Control District Name (list all that apply): None   |                                     |           |                                    |  |  |  |
| Is the project located within a springshed or recharge area?  |                                     |           |                                    |  |  |  |
| <b>Ground Water</b><br>Sole Source Aquifer (SSA)?<br>If yes, complete Part 5, D ar                      |                                     |           | EPA website ( <i>Figure 11-2</i> ) |  |  |  |
| Other Aquifer?  | 🗆 Yes 🔨 No                          | Name      |                                    |  |  |  |

□ Yes ⊻ No

Yes 🗆 No

| Springs vents?             | 🗆 Yes 🔽 No | Name |
|----------------------------|------------|------|
| Well head protection area? | 🗆 Yes 🗸 No | Name |
| Groundwater recharge?      | 🗆 Yes 🔨 No | Name |

Notify District Drainage Engineer if karst conditions are expected or if a higher level of treatment may be needed due to a project being located within a WBID verified as Impaired in accordance with Chapter 62-303, F.A.C.

Date of notification: \_\_\_/ N/A /\_\_\_\_

### PART 4: WATER QUALITY CRITERIA

List all WBIDs and all parameters for which a WBID has been verified impaired, or has a TMDL in **Table 1**. This information must be updated during each Re-evaluation.

See Attached Table 1

Note: If BMAP or RAP has been identified in **Table 1**, **Table 2** must also be completed. *Attach notes or minutes from all coordination meetings identified in* **Table 2**.

FDOT is not a stakeholder in this project. Additional coordination may occur through Glenn Pressimone, at Glenn.Pressimone@CFXWay.com or 407-690-5321

| EST recommendations confirmed with agencies?          | Yes 🗆 No   |
|---|------------|
| BMAP Stakeholders contacted:                          | 🗆 Yes 🖌 No |
| TMDL program contacted:                               | 🗆 Yes 🗙 No |
| RAP Stakeholders contacted:                           | 🗆 Yes 🗙 No |
| Regional water quality projects identified in the ELA | 🗆 Yes 🛛 No |
| If yes, describe:                                     | -          |

Potential direct effects associated with project construction and/or operation identified? If yes, describe:

Yes 🗆 No

There is potential for this project to temporarily impact surrounding waterways, including the Econlockhatchee River, due to off-site migration of sediment during construction. These effects can be minimized/avoided by following BMPs and implementing NPDES standards.

#### PART 5: WQIE DOCUMENTATION

- □ A. No involvement with water quality
- □\_ B. No water quality regulatory requirements apply.
- C. Water quality regulatory requirements apply to this project (provide Evaluator's information below). Water quality and quantity issues will be mitigated through compliance with the design requirements of authorized regulatory agencies.
- D. EPA Ground/Drinking Water Branch review required.
   Yes □ No
   Concurrence received?
   Yes □ No
   If Yes, Date of EPA Concurrence: \_\_/\_\_/ (Attach the concurrence letter)

The environmental review, consultation, and other actions required by applicable federal environmental laws for this project are being, or have been, carried out by FDOT pursuant to 23 U.S.C. § 327 and a Memorandum of Understanding dated December 14, 2016 and executed by FHWA and FDOT.

| Evaluator Name (print): Rob Myers          |                 |  |  |  |  |
|--|-----------------|--|--|--|--|
| Title: North Florida Environmental Manager |                 |  |  |  |  |
| Signature: Allet Hat                       | Date: 12-7-2017 |  |  |  |  |
|  |                 |  |  |  |  |

# Table 1 Water Body Information

| Receiving Water<br>Body Name | DEP Group<br>Number | DEP Basin<br>(Group<br>Name) | Water Body<br>Identificatio<br>n Number | Waterbody<br>Classification | Special<br>Designations | Appropriate<br>Numeric<br>Nutrient<br>Criteria | Impairment<br>Status | TMDL Status | Pollutant of Concern and Numeric Criteria or<br>TMDL Criteria | Project in Basin with BMAP, RAP,<br>or SSAC |
|------------------------------|---------------------|------------------------------|---|-----------------------------|-------------------------|--|----------------------|-------------|---|---|
| Econlockhatchee<br>River     | 2                   | Middle St.<br>Johns          | 3021                                    | Class 3F                    | None                    | Stream   | No                   | No          | Fecal Coliform, Bacteria                                      | None  |
| Econlockhatchee<br>River     | 2                   | Middle St.<br>Johns          | 2991                                    | Class 3F                    | None                    | Stream   | No                   | No          | Fecal Coliform, Bacteria                                      | None  |
| Econlockhatchee<br>River     | 2                   | Middle St.<br>Johns          | 3030                                    | Class 3F                    | None                    | Stream   | Yes                  | Yes         | Fecal Coliform, Bacteria, Dissolved Oxygen,<br>BOD, TN, TP    | None  |