Florida Department of Agriculture and Consumer Services
Office of Agricultural Water Policy

NOTICE OF INTENT TO IMPLEMENT
CONSERVATION PLANS FOR SPECIFIED
AGRICULTURAL OPERATIONS
Rule 5M-12.005, F.A.C.

Note: Operations eligible to submit an NOI under this program are: Commercial livestock operations, and operations conducting multiple agricultural land uses on properties within the same county or on contiguous properties that cross county boundaries

- Complete all sections of the Notice of Intent (NOI). Each NOI may list only properties that are within the same county and are owned or leased by the same person or entity, and on which applicable BMPs will be identified and implemented under Rule 5M-12.005, F.A.C.
- Submit to the Florida Department of Agriculture and Consumer Services (FDACS), at the address below: the NOI, a copy of the conservation plan, and copies of the completed BMP Checklist(s) from any FDACS BMP manuals relevant to the operation.
- Keep a copy of the NOI, conservation plan, and the BMP Checklist(s) in your files as part of your BMP record keeping.

You can visit http://www.doacs.state.fl.us/onestop/forms/01539.pdf to obtain an electronic version of this NOI form and guidance on developing a conservation plan under this rule.

If you would like assistance in completing this NOI form or the relevant BMP Checklist(s), or in implementing BMPs, contact FDACS staff at (850) 617-1727 or AgBmpHelp@FreshFromFlorida.com.

Mail this completed form, plan, and BMP Checklist(s) to: 1203 Governors Square Boulevard, Suite 200 Tallahassee, Florida 32301

PERSON TO CONTACT

Name: ____________________________
Business Relationship to Landowner/Leaseholder: ____________________________
Mailing Address: ____________________________
City: ____________________________ State: _______ Zip Code: _______
Telephone: ____________________________ FAX: ____________________________
Email: ____________________________

☐ LANDOWNER OR ☐ LEASEHOLDER INFORMATION (check all that apply)

NOTE: If the Landowner/Leaseholder information is the same as the Contact Information listed above, please check: ☐ Same as above. If not, complete the authorized contact information below.

Name: ____________________________
Mailing Address: ____________________________
City: ____________________________ State: _______ Zip Code: _______
Telephone: ____________________________ FAX: ____________________________
Email: ____________________________
Complete the following information for the property on which BMPs will be implemented under this NOI. You may list multiple parcels if they are located within the same county and are owned or leased by the same person or entity.

**Operation Name:**

**County:**

**Tax Parcel Identification Number(s) from County Property Appraiser**

Please submit a copy of your county tax bill(s) for all enrolled property, with owner name, address, and the tax parcel ID number(s) clearly visible. **If you cannot provide a copy of the tax bill(s), please write the parcel owner’s name and tax parcel ID number(s) below in the format the county uses.** Attach a separate sheet if necessary *(see form provided).*

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<th>Parcel No.</th>
<th>Parcel Owner</th>
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☐ Additional parcels are listed on separate sheet. *(check if applicable)*

**Total # of acres of all parcels listed (as shown property tax records):**

**Total # of acres on which BMPs will be implemented under this NOI:**

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**IN ACCORDANCE WITH SECTION 403.067(7)(c)2, FLORIDA STATUTES, I SUBMIT THE FOREGOING INFORMATION AND THE BMP CHECKLIST AS PROOF OF MY INTENT TO IMPLEMENT THE BMPS APPLICABLE TO THE PARCEL(S) ENROLLED UNDER THIS NOTICE OF INTENT.**

**PRINT NAME:**

*(check all that apply)*

☐ LANDOWNER  ☐ LEASEHOLDER  ☐ AUTHORIZED Agent *(see below)*

*Relationship to Landowner or Leaseholder:*

**SIGNATURE:**

**DATE:**

Once submitted to the Department with the NOI, the completed conservation plan is a public document, except for plan content that is confidential pursuant to s. 403.067(7)(c)5, F.S.

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**NAME OF STAFF ASSISTING WITH NOI:**

**NOTES:**

1. You must keep records of BMP implementation, as specified in Rule 5M-12.005, F.A.C. All BMP records are subject to inspection.
2. You must notify FDACS if there is a full or partial change in ownership with regard to the parcel(s) enrolled under this NOI.
3. Please remember that it is your responsibility to stay current with future updates of this rule and any applicable BMP manuals. Visit [www.floridaagwaterpolicy.com](http://www.floridaagwaterpolicy.com) periodically to check for updates.
ADDITIONAL TAX PARCEL LISTINGS

Operation Name: 

County: 

Parcel No.: Parcel Owner:

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