PART 1: PROJECT INFORMATION						
Project Name:	Whiting Street PD&E Study					
County:	Hillsborough					
FM Number:	THEA Project No. HI-0141					
Federal Aid Project No:	N/A					
Brief Project Description:	The Tampa Hillsborough Expressway Authority (THEA), in coordination with the City of Tampa, is conducting a Project Development and Environment (PD&E) Study to extend Whiting Street and reconfigure the on-ramps of the Selmon Expressway at Jefferson Street and off- ramps at Florida Avenue and Channelside Drive. The study considers extending Whiting Street to North Meridian Avenue and includes improvements and realignment of the existing segment of Whiting Street, from Jefferson Street to North Brush Street. The extension will provide a direct connection of the Whiting Street corridor to North Meridian Avenue which will improve traffic flow and safety for all transportation modes and offer additional connections within the street network.					

PART 2: DETERMINATION OF WOIE SCOPE

Does project discharge to surface or ground water?	🛛 Yes	🗌 No
Does project alter the drainage system?	🛛 Yes	🗌 No

Is the project located within a permitted MS4? Name: City of Tampa (Permit ID FLS00008)

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.

 \boxtimes Yes \square No

PART 3: PROJECT BASIN AND RECEIVING WATER CHARACTERISTICS

Surface Water

Receiving water(s) names: Tampa Bay (Ybor City Drain)

Water Management District: SWFWMD

Environmental Look Around meeting date: N/A – not included in project scope.

Attach meeting minutes/notes to the checklist.

Water Control District Name (list all that apply): N/A

Groundwater

Sole Source Aquifer (SSA)?	Yes	No
Name		
If yes, complete Part 5, D and the PD&E Manual	l complete	SSA Checklist shown in Part 2, Chapter 11 of

Other Aquifer? Name <u>Floridan</u>	🛛 Yes	🗌 No
Springs vents? Name	🗌 Yes	🖂 No
Well head protection area? Name	🗌 Yes	🖂 No
Groundwater recharge? Name	Yes	🛛 No

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: No karst conditions expected.

PART 4: WATER QUALITY CRITERIA

List all WBIDs and all parameters for which a WBID has been verified impaired, or has a TMDL in <u>Table 1</u>. This information should be updated during each re-evaluation as required.

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

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:	

🗌 Yes 🔀 No

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

Discuss any other relevant information related to water quality including Regulatory Agency Water Quality Requirements.

This project will require water quality treatment in accordance with SWFWMD regulations. Applicable rules include Chapters 40D-400, 62-302, 62-303, and 62-330, Florida Administrative Code (F.A.C.).

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 stormwater issues will be mitigated through compliance with the design requirements of authorized regulatory agencies.

D. EPA Ground/Drinking Water Branch review required. Concurrence received?

Yes	\boxtimes	No
Yes		No

If Yes, Date of EPA Concurrence: <u>Click here to enter a date.</u>. 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): Theresa D. Ellison					
Title: Senior Drainage Engineer					
Signature: Gulli Date:1/7/2022					

Table 1: Water Quality Criteria

Receiving Waterbody Name (list all that apply)	FDEP Group Number / Name	WBID(s) Numbers	Classification (I,II,III,III,IIIL,IV,V)	Special Designations*	NNC limits**	Verified Impaired (Y/N)	TMDL (Y/N)	Pollutants of concern	BMAP, RA Plan or SSAC
Ybor City Drain	1 / Old Tampa Bay	1584A1	3M	MS4	-	Yes	No	Fecal Coliform	No

* ONRW, OFW, Aquatic Preserve, Wild and Scenic River, Special Water, SWIM Area, Local Comp Plan, MS4 Area, Other ** Lakes, Spring vents, Streams, Estuaries

Note: If BMAP or RAP has been identified in <u>Table 1</u>, <u>Table 2</u> must also be completed.

Table 2: REGULATORY Agencies/Stakeholders Contacted

Receiving Water Name (list all that apply)	Contact and Title	Date Contacted	Follow-up Required (Y/N)	Comments