



**Connecticut Department of
Energy & Environmental Protection**
Bureau of Materials Management & Compliance Assurance
Engineering & Enforcement Division

General Permit Registration Form to Construct and Operate Certain Recycling Facilities

Please complete this form in accordance with the [instructions](#) (DEEP-RCY-INST-005) to ensure the proper handling of your registration. Print or type unless otherwise noted.

CPPU USE ONLY	
App #:	_____
Doc #:	_____
Check #:	_____
Program: see below	

Part I: Registration Type

Check the appropriate box identifying the registration type.

This registration is for a (check all that apply): <input type="checkbox"/> New general permit registration and <input type="checkbox"/> Replacement of an individual permit or an authorization <input type="checkbox"/> Renewal of an existing registration	For renewals or modifications: 1. Existing permit or authorization number: 2. Expiration Date:
Town where site is located: _____	
Brief Description of Project: _____	

Part II: Fee Information

√	Facility Types (Check the type of facility you are applying for)	Initial Fee	DEEP Use Only	
			Application No.	Permit No.
Program: Transfer Facility General Permit				
<input type="checkbox"/>	Drop-Site Facility	\$200.00 [#334]		
<input type="checkbox"/>	Recyclables Transfer Facility	\$500.00 [#336]		
Program: Volume Reduction General Permit				
<input type="checkbox"/>	Limited Processing Facility	\$500.00 [#335]		
<input type="checkbox"/>	Single Item	\$500.00 [#337]		

Note: A fee is required to be submitted with *each* registration. Under this general permit, only one recycling registration per facility is allowed. The fee for municipalities is 50% of the above listed rates. The registration will not be processed without the fee. The fee shall be non-refundable and shall be paid by check or money order to the Department of Energy and Environmental Protection.

Part III: Registrant Information (continued)

3. Primary contact for departmental correspondence and inquiries, if different than the registrant.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

*E-mail:

*By providing this e-mail address you are agreeing to receive official correspondence from the department, at this electronic address, concerning the subject registration. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify the department if your e-mail address changes.

4. Attorney or other representative, if applicable:

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Attorney:

Phone:

ext.

E-mail:

5. Facility Operator, if different than the registrant:

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

E-mail:

6. Property Owner, if different than the registrant:

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

E-mail:

Part III: Registrant Information (continued)

7. Engineer(s) or other consultant(s) employed or retained to assist in preparing the registration or in designing or constructing the activity.

Name:

Mailing Address:

City/Town: State: Zip Code:

Business Phone: ext.:

Contact Person: Phone: ext.

E-mail:

Service Provided:

Check here if additional sheets are necessary, and label and attach them to this sheet.

Part IV: Site Information

1. SITE NAME AND LOCATION

Name of Site :

Street Address or Location Description:

City/Town: State: Zip Code:

Tax Assessor's Reference: Map Block Lot

Latitude and longitude of the exact location of the proposed activity in degrees, minutes, and seconds or in decimal degrees: Latitude: Longitude:

Method of determination (check one):

GPS USGS Map Other (please specify):

If a USGS Map was used, provide the quadrangle name:

2. INDIAN LANDS: Is or will the facility be located on federally recognized Indian lands? Yes No

3. COASTAL BOUNDARY: Is the activity which is the subject of this registration located within the coastal boundary as delineated on DEEP approved coastal boundary maps? Yes No

If yes, and this registration is for a new authorization or a modification of an existing authorization where the physical footprint of the subject activity is modified, you must submit a [Coastal Consistency Review Form](#) (DEP-APP-004) with your application as Attachment C.

Information on the coastal boundary is available at www.lisrc.uconn.edu. (Click on the upper tab or left hand column labeled "Maps", then "Coastal Connecticut") or the local town hall or on the "Coastal Boundary Map" available at DEEP Maps and Publications (860-424-3555).

If no, is the activity which is the subject of this registration located within the coastal area? (see town list in the instructions) Yes No

Part IV: Site Information (continued)

4. **ENDANGERED OR THREATENED SPECIES:** According to the most current "State and Federal Listed Species and Natural Communities Map", is the project site located within an area identified as a habitat for endangered, threatened or special concern species? Yes No Date of Map:

If yes, complete and submit a [Request for NDDB State Listed Species Review Form](#) (DEP-APP-007) to the address specified on the form. **Please note NDDB review generally takes 4 to 6 weeks and may require additional documentation from the registrant.**

A **copy** of the completed *Request for NDDB State Listed Species Review Form* and the CT NDDB response **must** be submitted with this completed registration as Attachment D.

For more information visit the DEEP website at www.ct.gov/deep/nddbrequests or call the NDDB at 860-424-3011.

5. **AQUIFER PROTECTION AREAS:** Is the site located within a town required to establish Aquifer Protection Areas, as defined in section 22a-354a through 354bb of the General Statutes (CGS)?

Yes No To view the applicable list of towns and maps visit the DEEP website at www.ct.gov/deep/aquiferprotection

If yes, is the site within an area identified on a Level A map? Yes No

If yes, is the site within an area identified on a Level B map? Yes No

If your site is on a Level A map, check the DEEP website, [Business and Industry Information](#) (www.ct.gov/deep/aquiferprotection) to determine if your activity is required to be registered under the Aquifer Protection Area Program.

If your site is on a Level B map, no action is required at this time, however you may be required to register under the Aquifer Protection Area Program in the future when the area is delineated as Level A.

6. **CONSERVATION OR PRESERVATION RESTRICTION:** Is the property subject to a conservation or preservation restriction? Yes No

If Yes, proof of written notice of this registration to the holder of such restriction or a letter from the holder of such restriction verifying that this registration is in compliance with the terms of the restriction, must be submitted as Attachment E.

7. **ENVIRONMENTAL JUSTICE COMMUNITIES:**

- a. Does the site include a **new** facility or **new** activity located within an environmental justice community as defined in the instructions (DEP-RCY-INST-005)? Yes No

If yes, you must hold an informal public meeting concerning the subject activity prior to issuance of your permit approval. Refer to the instructions (DEP-RCY-INST-005) for more detail.

- b. Does the subject registration include an activity which will occur at an **existing applicable** facility, located within an environmental justice community? Yes No

If Yes, the registrant shall submit an Environmental Justice Public Participation Plan **PRIOR TO FILING THIS REGISTRATION** and adhere to the requirements of section 22a-20a CGS. Refer to the Environmental Justice Public Participation Guidelines (DEP-EJ-GUID-001) for more information (www.ct.gov/deep/environmentaljustice).

Part VI: Supporting Documents

Check the applicable box below for each attachment being submitted with this registration form. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.).

- | | | |
|--------------------------|---------------|---|
| <input type="checkbox"/> | Attachment A: | An 8½ X 11" copy of the relevant portion or a full-sized original of a USGS Quadrangle Map indicating the exact location of the facility or site. Indicate the quadrangle name on the map. And an engineered drawing of the site generated and certified by a professional engineer licensed in the state of Connecticut. |
| <input type="checkbox"/> | Attachment B: | Professional Engineer Certification (for facilities that collect used oil or spent anti-freeze); if applicable. |
| <input type="checkbox"/> | Attachment C: | <i>Coastal Consistency Review Form</i> (DEP-APP-004), if applicable. |
| <input type="checkbox"/> | Attachment D: | Copy of the completed <i>Request for NDDB State Listed Species Review Form</i> (DEP-APP-007) and the NDDB response, if applicable. |
| <input type="checkbox"/> | Attachment E: | Conservation or Preservation Restriction Information, if applicable |
| <input type="checkbox"/> | Attachment F: | Copy of the Written Environmental Justice Public Participation Plan Approval Letter, if applicable. |

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Part VII: Registrant Certification

The registrant *and* the individual(s) responsible for actually preparing the registration must sign this part. A registration will be considered incomplete unless all required signatures are provided.

<p>"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.</p> <p>I certify that both a site plan and an operation and management plan have been prepared in accordance with Section 4 of the subject general permit and are available for inspection at the subject recycling facility.</p> <p>I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text.</p> <p>I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."</p>	
Signature of Registrant	Date
Name of Registrant (print or type)	Title (if applicable)
Signature of Preparer	Date
Name of Preparer (print or type)	Title (if applicable)
<input type="checkbox"/> Check here if additional signatures are necessary. If so, please reproduce this sheet and attach signed copies to this sheet.	

Note: Please submit the completed Registration Form, Fee, and all Supporting Documents to:

CENTRAL PERMIT PROCESSING UNIT
DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

A copy of the completed registration form shall also be sent to the Chief Elected Official of the municipality in which the subject facility is located.

Attachment B: Professional Engineer Certification
(for facilities that collect used oil or spent anti-freeze)

The following certification must be signed by a professional engineer, licensed to practice in Connecticut.

<p>“I have personally examined and am familiar with each tank or collection container used at this facility to collect used oil or spent anti-freeze and I certify based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information and in my professional judgement, that the tank(s) or collection container(s) used to collect used oil or spent anti-freeze at this facility is designed and built in accordance with recognized good engineering standards and said tank(s) or collection container(s) is in good condition.</p> <p>I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute.”</p>	
_____ Signature of Professional Engineer	_____ Date
_____ Name of Professional Engineer (print or type)	_____ P.E. Number
	Affix P.E. Stamp Here 