



Connecticut Department of
 Energy & Environmental Protection
 Bureau of Water Protection & Land Reuse
 Office of Long Island Sound Programs

Permit Application for Programs Administered by the Office of Long Island Sound Programs

IMPORTANT - Please refer to the [instructions](#) (DEEP-OLISP-INST-100) for completing this application form to ensure that all required information is provided. Print or type all information within the form, providing additional pages as necessary.

CPPU USE ONLY	
App #:	_____
Doc #:	_____
Check #:	_____

Part I: Permit Type and Fee Information

Check only one of the boxes below identifying the applicable state permit program(s). You must submit the initial fee indicated below and a copy of the published notice of permit application and the completed [Certification of Notice Form](#) with this application.

Type of Permit	Initial Fee
<input type="checkbox"/> Structures, Dredging & Fill <i>CGS sec. 22a-361</i> [#1085]	\$660.00
<input type="checkbox"/> Structures, Dredging & Fill and 401 Water Quality Certificate [#1632]	\$660.00
<input type="checkbox"/> Structures, Dredging & Fill, and Tidal Wetlands <i>CGS sec. 22a-361 & sec. 22a-32</i> [#438]	\$660.00
<input type="checkbox"/> Structures, Dredging & Fill, and Tidal Wetlands and 401 Water Quality Certificate [#417]	\$660.00
<input type="checkbox"/> 401 Water Quality Certificate <i>33 U.S.C. 1341 (For Federal Use Only)</i> [#1195]	None
<p>Note: The fee for municipalities is 50% of the above listed rates. Additional fees based on the water area occupied by the project will be invoiced. The application will not be processed without the initial fee. The fee shall be non-refundable and shall be paid by check or money order to the Department of Energy and Environmental Protection.</p>	
<p>Town where site is located: _____</p>	
<p>Brief Description of Project:</p> 	
<p>The public notice of application must be published prior to submitting an application, as required in CGS section 22a-6g. A copy of the published notice of application and the completed Certification of Notice Form must be included as Attachment AA to this application. Your application will not be processed if Attachment AA is not included.</p>	
<p>Date of Publication: _____</p>	

Check here, in addition to one of the boxes above, if your application is being submitted pursuant to CGS sec. 22a-361(a)(2)(d) to address a violation.

Part II: Applicant Information

- If an applicant is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of State. If applicable, registrant's name shall be stated **exactly** as it is registered with the Secretary of State. Please note, for those entities registered with the Secretary of State, the registered name will be the name used by DEEP. This information can be accessed at the Secretary of State's database (CONCORD). (www.concord-sots.ct.gov/CONCORD/index.jsp)
- If an applicant is an individual, provide the legal name (include suffix) in the following format: First Name; Middle Initial; Last Name; Suffix (Jr, Sr., II, III, etc.).
- If there are any changes or corrections to your company/facility or individual mailing or billing address or contact information, please complete and submit the [Request to Change Company/Individual Information](#) to the address indicated on the form. If there is a change in name of the entity holding a DEEP license or a change in ownership, contact the Office of Planning and Program Development (OPPD) at 860-424-3003. For any other changes you must contact the specific program from which you hold a current DEEP license.

1. Applicant Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

*E-mail:

*By providing this e-mail address you are agreeing to receive official correspondence from DEEP, at this electronic address, concerning the subject application. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify DEEP if your e-mail address changes.a) Applicant Type (check one):

individual federal agency state agency municipality tribal

*business entity (*If a business entity complete i through iii):

i) check type: corporation limited liability company limited partnership
 limited liability partnership statutory trust Other: _____

ii) provide Secretary of the State business ID #: _____ This information can be accessed at database (CONCORD). (www.concord-sots.ct.gov/CONCORD/index.jsp)

iii) Check here if your business is **NOT** registered with the Secretary of State's office.

b) Applicant's interest in property at which the proposed activity is to be located:

site owner option holder lessee

easement holder operator other (specify): _____

Check if any co-applicants. If so, attach additional sheet(s) with the required information as requested above.

Note: If the applicant is not the owner, submit written permission from the owner as Attachment B.

2. List billing contact, if different than the applicant.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

E-mail:

Part II: Applicant Information (continued)

3. List primary contact for departmental correspondence and inquiries if different than applicant.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

*E-mail:

4. List Site Owner, if different than applicant:

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

E-mail:

5. List Facility Owner, if different than applicant:

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

E-mail:

6. List attorney or other representative, if applicable.

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Attorney:

Title:

E-mail:

7. List all engineer(s), surveyor(s) and/or other consultant(s) employed or retained to assist in preparing the application and designing or constructing the activity.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Contact Person:

Title:

E-mail:

Service Provided:

Check if additional Applicant Information sheets are included, and label and attach them to this sheet.

8. A pre-application meeting with Office of Long Island Sound Program (OLISP) staff is strongly recommended prior to application submission. Please note the meeting date and OLISP staff person's name:

Staff Name:

Meeting Date:

Part III: Project Information (continued)

3. Describe the purpose of, the need for, and intended use of the proposed activities. (For example, private recreational boating, marina, erosion protection, public infrastructure, etc.)

4. Identify and describe all coastal or aquatic resources on the site by checking the appropriate box and describe the expected impact on these resources. You may add addenda as necessary as Attachment M.

Coastal/Aquatic Resources	On-site	Adjacent	Describe Expected Impact
Coastal bluffs and escarpments	<input type="checkbox"/>	<input type="checkbox"/>	
Rocky Shorefront	<input type="checkbox"/>	<input type="checkbox"/>	
Beaches and Dunes	<input type="checkbox"/>	<input type="checkbox"/>	
Intertidal Flats	<input type="checkbox"/>	<input type="checkbox"/>	
Tidal Wetlands	<input type="checkbox"/>	<input type="checkbox"/>	
Fresh Water Wetlands and Watercourses	<input type="checkbox"/>	<input type="checkbox"/>	
Estuarine Embayments	<input type="checkbox"/>	<input type="checkbox"/>	
Coastal Hazard Areas	<input type="checkbox"/>	<input type="checkbox"/>	
Developed Shorefront	<input type="checkbox"/>	<input type="checkbox"/>	
Islands	<input type="checkbox"/>	<input type="checkbox"/>	
Near shore Waters	<input type="checkbox"/>	<input type="checkbox"/>	
Offshore Waters	<input type="checkbox"/>	<input type="checkbox"/>	
Shorelands	<input type="checkbox"/>	<input type="checkbox"/>	
Shellfish Concentration Areas	<input type="checkbox"/>	<input type="checkbox"/>	
Wildlife Resources and Habitat	<input type="checkbox"/>	<input type="checkbox"/>	
Benthic (bottom) Habitat	<input type="checkbox"/>	<input type="checkbox"/>	
Indigenous aquatic life, including shellfish and finfish	<input type="checkbox"/>	<input type="checkbox"/>	
Submerged Aquatic Vegetation	<input type="checkbox"/>	<input type="checkbox"/>	

Part III: Project Information (continued)

5. Identify whether the proposed activities will impact the following categories. If so, describe the expected impact, adding addenda as necessary as Attachment M.

Categories	Yes	No	Describe Expected Impact
Prevention or alleviation of shoreline erosion and coastal flooding	<input type="checkbox"/>	<input type="checkbox"/>	
Use and development of adjoining uplands	<input type="checkbox"/>	<input type="checkbox"/>	
Use and development of adjacent lands and properties	<input type="checkbox"/>	<input type="checkbox"/>	
Improvement of coastal and inland navigation for all vessels, including small craft for recreational purposes	<input type="checkbox"/>	<input type="checkbox"/>	
Pollution control	<input type="checkbox"/>	<input type="checkbox"/>	
Water quality	<input type="checkbox"/>	<input type="checkbox"/>	
Water circulation and drainage	<input type="checkbox"/>	<input type="checkbox"/>	
Recreational use of public water	<input type="checkbox"/>	<input type="checkbox"/>	
Management of coastal resources	<input type="checkbox"/>	<input type="checkbox"/>	
Public health and welfare	<input type="checkbox"/>	<input type="checkbox"/>	
The protection of life and property from flood, hurricane and other natural disasters	<input type="checkbox"/>	<input type="checkbox"/>	

6. Identify and evaluate any potential beneficial and adverse impacts to:

a. navigation: (include federal and local navigation channels and distance to nearby docks)

b. public access to, and public use of, public trust lands and waters waterward of mean high water:

Part III: Project Information (continued)

10. After all measures to eliminate or minimize adverse impacts have been incorporated in the proposed project, describe why any adverse impacts that remain should be deemed acceptable by OLISP.

11. a. Is any portion of the work for which authorization is being sought now complete or under construction?

Yes No ***If No, skip to question #12.***

b. Specify what parts of the proposed work have been completed or are under construction.

c. Indicate when such work was undertaken or completed. Identify completed portions on the plans submitted.

d. When did you acquire interest in this property?

e. Were you responsible for the unauthorized activity as a result of actions taken before the acquisition of the property? Yes No If Yes, explain.

Part III: Project Information (continued)

f. Did you know or have reason to know of the unauthorized activity? Yes No If Yes, explain.

g. Is this application associated with an enforcement action pending with DEEP? Yes No
If Yes, explain:

12. Is there or will there be any federal and/or state funding of this project? Yes No If Yes, explain.

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

Part IV: Site and Resource 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:** Will the activity which is the subject of this application be located on federally recognized Indian lands? Yes No

3. **COASTAL AREA:** Is the project site located in a municipality within the coastal area? (check town list in the instructions) Yes No

4. **ENDANGERED OR THREATENED SPECIES:** According to the most current "State and Federal Listed Species and Natural Communities Map", will the activity which is the subject of this application, including all impacted areas, be located within an area identified as a habitat for endangered, threatened or special concern species?

Yes No Date of Map:

Part IV: Site Information (continued)

If yes, complete and submit a [Request for NDDB State Listed Species Review Form](#) (DEEP-APP-007) to the address specified on the form, **prior** to submitting this application. **Please note NDDB review generally takes 4 to 6 weeks and may require additional documentation from the applicant. A copy of the completed Request for NDDB State Listed Species Review Form and the CT NDDB response *must* be submitted with this completed application as Attachment C.**

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

5. **AQUIFER PROTECTION AREAS:** Is the site located within a mapped Level A or Level B [Aquifer Protection Area](#), as defined in CGS section 22a-354a through 22a-354bb?

Yes No If **yes**, check one: Level A **or** Level B

If **Level A**, are any of the [regulated activities](#), as defined in RCSA section 22a-354i-1(34), conducted on this site? Yes No

If **yes**, and your business is **not** already registered with the Aquifer Protection Program, contact the [local aquifer protection agent](#) or DEEP to take appropriate actions.

For more information on the Aquifer Protection Area Program visit the DEEP website at www.ct.gov/deep/aquiferprotection or contact the program at 860-424-3020.

6. **SHELLFISH COMMISSION:** Does your town have a shellfish commission? Yes No

If yes, you must submit a completed *Shellfish Commission Consultation Form* (DEEP-OLISP-APP-101D) with this application as Attachment D.

7. **HARBOR MANAGEMENT COMMISSION:** Does your town have a Harbor Management Commission?

Yes No

If yes, you must submit a completed *Harbor Management Commission Consultation Form* (DEEP-OLISP-APP-101E) with this application as Attachment E.

8. **DEPARTMENT OF AGRICULTURE/BUREAU OF AQUACULTURE:** If the subject site is located in a specific area as explained in Part IV, item 8 of the application instructions (DEEP-OLISP-INST-100), you must submit a completed *Department of Agriculture/Bureau of Aquaculture Consultation Form* (DEEP-OLIS-APP-101F) as Attachment F.

9. **CONSERVATION OR PRESERVATION RESTRICTION:** Will the activity which is the subject of this application be located within a conservation or preservation restriction area? Yes No

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

10. Indicate the number and date of issuance of any previous state coastal permits or certificates issued by DEEP authorizing work at the site and the names to whom they were issued.

Permit/COP Number

Date Issued

Name of Permittee/Certificate Holder

Part IV: Site Information (continued)

11. Identify any changes in conditions of the site (including ownership, development, use, or natural resources) since the issuance of the most recent state permit or certificate authorizing work at the site.

12. a. Identify and describe the existing municipal zoning classification of the site.

b. Identify and describe the existing land use(s) on and adjacent to the site.

13. Provide the name of the waterbody at the site of proposed work: _____

14. Provide the elevation of the applicable regulatory limit for your project referenced to NAVD88. Refer to the [instructions](#) for more information.

Tidal Wetlands Limit = _____ Coastal Jurisdiction Limit = _____

15. How was the regulatory limit identified above determined? Please check one of the following:

[DEEP-calculated elevation](#)

Self-calculated elevation (If a self-calculated elevation is used, please provide the additional information and calculations per the instructions.)

Mean High Water elevation (use only if project is upstream of a tide gate, dam or weir)
(If a MHW elevation is used, provide a discussion of the location of the tide gate, dam or weir.)

If other than a DEEP calculated elevation was used to calculate the CJL, please provide the additional information and calculations per the instructions and label and attach them as Attachment M.

16. Provide the elevations of the mean high water and mean low water at the site and the reference datum used. Refer to the instructions regarding elevation datum.

MHW = _____ MLW = _____ Datum = _____

Check here If NAVD88 is not referenced, and provide an orthometric conversion table in Attachment M.

Part V: Supporting Documents

The supporting documents listed below must be submitted with the application and labeled as indicated. The specific information required in each attachment is described in the *Instructions for Completing a Permit Application for Programs Administered by the Office of Long Island Sound Programs* (DEEP-OLIS-INST-100). Check the box by the attachments listed to indicate that they have been submitted.

- Attachment AA: a copy of the published notice of permit application, as described in the instructions, attached to a completed "[Certification of Notice Form](#)" (DEEP-APP-005A)
- Attachment A: Executive Summary; summarize the information contained in the complete application which must include a description of the proposed regulated activities and a synopsis of the environmental and engineering analyses of the impact of such activities. Include a list of the titles of all plans, drawings, reports, studies, appendices, or other documentation which are attached as part of the application.
- Attachment B: If the applicant is not the owner, submit written permission from the owner as Attachment B.
- Attachment C: **Copy** of the completed *Request for NDDB State Listed Species Review Form* (DEEP-APP-007) **and** the NDDB response, if applicable.
- Attachment D: [Shellfish Commission Consultation Form](#) (DEEP-OLIS-APP-101D), if applicable.
- Attachment E: [Harbor Management Commission Consultation Form](#) (DEEP-OLIS-APP-101E), if applicable.
- Attachment F: [Department of Agriculture/Bureau of Aquaculture Consultation Form](#) (DEEP-OLIS-APP-101F), if applicable.
- Attachment G: Conservation or Preservation Restriction Information, if applicable.
- Attachment H: [Applicant Compliance Information Form](#) (DEEP-APP-002).
- Attachment I: Provide plans of the project as Attachment I. They must be 8 1/2" x 11" scaled plans of the site and proposed work, with the datum of the measurements noted, including:
 - a. A Vicinity Map;
 - b. A Tax Assessor's Map showing the Map, Block and Lot #, subject property and immediately adjacent properties;
 - c. Plan Views showing existing and proposed conditions, including vessel berthing arrangement, based on a site survey prepared by a licensed surveyor; and
 - d. An Elevation or Cross-Section View showing existing and proposed conditions, including vessel berthing arrangement, based on a site survey prepared by a licensed surveyor.**Please refer to Attachment I of the instructions for identification and discussion of required plan components.**
- Attachment J: Photographs showing existing conditions of the site.
- Attachment K: Land owner information, including names and mailing addresses, for all land owners of record for any property located five hundred feet (500) or less from the property lines of the subject property, certification that a copy of the Notice of Application was sent to each identified property owner and names and addresses of any known claimants of water rights adjacent to the project and owners or lessees of shellfish grounds or franchises within the area which work is proposed.
- Attachment L: [Applicant Background Information Form](#) (DEEP-APP-008) (if applicable).
- Attachment M: Other Information: Any other information the applicant deems relevant or is required by DEEP.
- Attachment N: [US. Army Corps of Engineers Consultation Form](#) (DEEP-OLISP-APP-101N)

Part VI: Applicant Certification

The applicant(s) *and* the individual(s) responsible for actually preparing the application must sign this part. An application will be considered insufficient 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 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> <p>I certify that this application is on complete and accurate forms as prescribed by the commissioner without alteration of the text.</p> <p>I certify that I have complied with all notice requirements as listed in section 22a-6g of the General Statutes.”</p>	
Signature of Applicant	Date
Name of Applicant (print or type)	Title (if applicable)
Signature of Preparer (if different than above)	Date
Name of Preparer (print or type)	Title (if applicable)
<input type="checkbox"/> Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet. You must include signatures of any person preparing any report or parts thereof required in this application (i.e., professional engineers, surveyors, soil scientists, consultants, etc.)	

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

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

Please remember to publish notice of the permit application **prior** to submitting your completed application to DEEP. Send a copy of the published notice to the chief elected official of the municipality in which the regulated activity is proposed and provide DEEP with a copy of the published notice, as described in the instructions, attached to a completed [Certification of Notice Form](#) (DEEP-APP-005A) as Attachment AA to this application.

Also send a copy of the notice to the Chairman of the Shellfish Commission and to the Chairman of the Harbor Management Commission in the municipality in which the regulated activity is proposed, where applicable. Refer to the [Shellfish Commission](#) and [Harbor Management Commission](#) lists for contact information.

Submit one complete application copy to the U.S. Army Corps of Engineers, Regulatory Division, 696 Virginia Road, Concord, MA, 01742.

If you are submitting a tidal wetlands application, mail complete application copies to the municipal CEO, Shellfish Commission and Conservation Commission.