DFC 18 2023

Connecticut Department of Energy & Environmental Protection

RECEIVED BY

Bureau of Materials Management & Compliance Assurance Water Permitting & Enforcement Division

General Permit Registration Form for Concentrated Animal Feeding Operations (CAFO)

Please complete this form in accordance with the <u>instructions</u> to ensure the proper handling of your registration. Please print or type unless otherwise noted. A Comprehensive Nutrient Management Plan (CNMP) and the Registration Fee must be submitted with this Registration.

	CPPU US	E ONLY	
App #:	20230	9498	
Doc #:	A W	7270	
Check #:	3320.	\$500.6	OC
		M culture Permits	

Part I: Registration Type and Fee Information

Check all appropriate boxes to identify the registration type:			
☐ Small CAFO			
☐ New registration	\$100.00 [#2358]		
☐ Modification of Registration and/or CNMP: Permit No	\$0 [#2361]		
☐ Medium CAFO	<u></u>		
New registration	\$250.00 [#2359]		
Modification of Registration and/or CNMP: Permit No	\$0 [#2361]		
☐ Large CAFO			
New registration	\$500.00 [#2360]		
Modification of Registration and/or CNMP: Permit No	\$0 [#2361]		
Town Location: North Canaan, CT			
This 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 or by such other method as the commissioner may allow.			

Part II: Surrender or Withdrawal of Existing Permit or Application

1.	If you currently hold an individual permit for the discharge(s) you are registering, you must request to surrender the individual permit to be authorized under the subject general permit.		
a. Do you request to surrender your individual permit? ☐ Yes ☑ No b. If yes, please provide your individual permit number:			
2.	If you currently have a pending individual permit application for discharge(s) you are registering, you must withdraw your individual permit application to be authorized under the subject general permit. a. Do you request to withdraw your individual permit application? Yes No b. If yes, please provide your application number:		

Part III: Registrant Information

If a registrant 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. (onlineBusinessSearch (ct.gov))

If a registrant 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 <u>Request to Change Company/Individual Information</u> 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 <u>DEEP.OPPD@ct.gov</u>. For any other changes, contact the specific program from which you hold a current DEEP license.

1.	Registrant name: LAWYEL brook Farm	LLC	
	Mailing Address: 390 NOV FOLK ROAD		
	City/Town: East Canaan	State: CT	Zip Code: 06024
	Business Phone: 860 307 3001	ext.:	
	Contact Person: James Jacquier	Phone:	ext.
	*E-mail: \amelonok-farm@ 60 Cg\0\ *By providing this e-mail address you are agreeing to receive electronic address, concerning the subject registration. Plesure you can receive e-mails from "ct.gov" addresses. Also	ve official corresp ase remember to	check your security settings to be
2.	Billing contact name (if different than the registrant):	same as	registrant
	Mailing Address:		9
	City/Town:	State:	Zip Code:
	Business Phone:	ext.:	
	Contact Person:	Phone:	ext.
	*E-mail:		

Part III: Registrant Information (continued)

			*		
3.	Primary contact for departmental correspondence and	inquiries, if diffe	erent than	the registrant:	
	Name:				
	Mailing Address:				
	City/Town:	State:	Zip Code:		
	Business Phone:	ext.:			
	Contact Person:	Phone:		ext.	
	*E-mail:				
4.	Owner of the property on which the CAFO is located, if	different than th	e registra	nt:	
	Legal Name of Property Owner: Jacqwill PM	perties	LLC		
	Mailing Address: 390 NOVFOIK ROAD				
	City/Town: East can aan	State: CT	Zip Code:	06024	
	Business Phone:	ext.:			
	Contact Person:	Phone:		ext.	
	E-mail: 10MYEL brookfarm@sbeglobal. net				
5.	Engineer(s) or consultant(s) employed or retained to as or constructing the activity:			tration or in designing	
	Firm Name: Agriculture Consulting Se	ervices. A	15		
	Firm Name: Agricuture Consulting So Mailing Address: 730 Warren Road				
	City/Town: HVaca	State: NV	Zip Code:	14850	
	Business Phone: 100 344 2697	ext.:			
	Attorney:	Phone:		ext.	
٠	*E-mail: brad. Schwab@ acscrops	. com	*		
	Check here if additional sheets are necessary, and label ar	nd attach them.			
Par	Part IV: Pre-Application Meeting				

If a pre-application meeting was held concerning the subject activity, provide the following:
DEEP Staff Name: 上めかし フリドルの Pre-Application Meeting Date: ____ Pre-Application Meeting Date: _____

Part V: Site Information

1	. CAFO NAME: LANTELBROOK FARM
	Primary Address of CAFO: 390 NULFOLK ROAD
	City/Town: EACT CAN AGestate: CT Zip Code: 06024
	*Latitude: 42.0055 & N *Longitude: 73.24873 W
	Watershed: Blackberry 12 IVEr
	*Lat/Long of entrance of the production area.
11	

Part V: Site Information (continued) M No INDIAN LANDS: Is or will the CAFO be located on federally recognized Indian lands? ☐ Yes 3. COASTAL BOUNDARY: Is there any activity included in, or proposed to be implemented by the CAFO that will be located within the coastal boundary as delineated on DEEP approved coastal boundary maps? Type Vo If yes, your Comprehensive Nutrient Management Plan must contain provisions to assure compliance with Connecticut's Coastal Management Act (CCMA), sections 22a-92 of the Connecticut General Statutes (CGS), as amended and will not cause adverse impacts to coastal resources as defined in CGS section 22a-93. Information on the coastal boundary is available at www.cteco.uconn.edu/map_catalog.asp (Select the town and then select coastal boundary. If the town is not within the coastal boundary you will not be able to select the coastal boundary map.) or the local town hall or on the "Coastal Boundary Map" available at the DEEP Store (860-424-3555 or deep.store@ct.gov). 4. NATURAL DIVERSITY DATA BASE (NDDB) - ENDANGERED OR THREATENED SPECIES: According to the most current "State and Federal Listed Species and Natural Communities Map", is there any activity included in, or proposed to be implemented by, your CAFO in the production area, that will be located within an area identified as a habitat for endangered, threatened or special concern species? Date of Map: 12. 11. 2023 Yes No If yes, complete and submit a Request for NDDB State Listed Species Review through DEEP's ezFile Portal by navigating to DEEP's website for NDDB Environmental Reviews, prior to submitting this registration. Please note NDDB review generally takes 4 to 6 weeks and may require the registrant to produce additional documentation, such as ecological surveys, which must be completed prior to submitting this registration. A copy of the NDDB Determination response letter that has not expired must be submitted with this completed registration. Include a copy of any mitigation measures developed for this activity and approved by NDDB. Be aware that you must renew your NDDB Determination if it expires before project work commences. For more information visit State Endangered Species Act CGS section 26-310(a), DEEP's website for NDDB Environmental Reviews or contact the NDDB at deep.nddbrequest@ct.gov. 5. AQUIFER PROTECTION AREAS: Is the CAFO or any portion of the CAFO located within a mapped Aquifer Protection Area, as defined in CGS section 22a-354b? Yes If yes, the CAFO owner or operator shall take all necessary precautions to prevent spills or other accidental releases of chemicals or agricultural wastes to the ground and/or water. If a spill or accidental release of chemicals or agricultural wastes occurs, the CAFO owner or operator is required to report the spill to CT DEEP's 24-Hour Emergency Spill Reporting line at 860-424-3338. For more information on the Aquifer Protection Area

Program visit the DEEP website at Aquifer Protection or contact the program at deep.aquiferprotection@ct.gov.

6. CONSERVATION OR PRESERVATION RESTRICTION: Is there any activity included in, or proposed to be implemented by the CAFO that will be located within a conservation or preservation restriction area?

Yes No

If yes, your Comprehensive Nutrient Management Plan must contain provisions to assure compliance with CGS section 47-42d where 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-kept on site.

Part VI: Description of CAFO Discharges and Operations

1. In the table below, list each discharge that is the subject of this application. For renewals of existing permits, label each discharge by the same discharge serial number (DSN) stated in the previous permit and provide the existing permit number. For new permits, label each discharge to a surface water consecutively starting with DSN 101 and for discharges to groundwater, label each discharge consecutively starting with DSN 301.

Discharge serial number (DSN) and existing permit number, if applicable	Source(s) of wastewater contributing to the discharge	Name of receiving surface waterbody or groundwater surface watershed	Surface water or groundwater quality classification	Geographical description of location of discharge point (e.g., 20 ft. north from Bear Bridge)
		ε .		
			*	
	X -			

2.	Provide a brief general description of the CAFO operation and each existing or proposed discharge. For p	roposed
	new discharges, provide a timeline for initiation of the discharge(s) as well as a summary of environmenta	l impact
	of the proposed discharge	

Refer to CNMP computation Sheet attac	ched
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Part VII: Activity Specific Information

1. TYPE AND NUMBER OF ANIMALS:				
Animals	No. in Open Confinement	No. Housed under Roof		
☑ Mature Dairy Cows		14 00		
☑ Dairy Heifers	- 1	250		
☐ Veal Calves				
☐ Cattle (not dairy or veal calves)		×		
Swine (55 lbs. or over)				
Swine (under 55 lbs.)				
Horses		.3		
☐ Sheep or Lambs				
☐ Turkeys				
☐ Chickens (Broilers)	0			
☐ Chickens (Layers)				
Ducks				
☐ Other: Specify				

Part VII: Activity Specific Information (continued)

2.	MANURE, DIGESTATE, LITTER AND/OR OTHER WASTEWATER PRODUCTION AND USE:			
	a. How much manure, digestate, litter or other wastewater is generated annually by the CAFO?			
		Manure UMMAS	0,301,000 tons or gallons (specify)	
		Manure Ugwids Digestate Separated Sivids	13,259 tons (solids)	
		Digestate Separate Siving	gallons (liquids)	
		Litter	tons	
		Other Wastewater Specify:	gallons	
		Is manure, digestate, litter or other wastewater generated at the		
		169 acres	e registrant that are available for application.	
		Check all land application best management practice that are I	peing implemented:	
		Buffers Infiltration field		
		☐ Setbacks ☐ Grass filter ☐ Conservation tillage ☐ Terrace		
			cting liquid manure	
		How much manure, digestate, litter or other wastewater product persons annually?	•	
		Manure	tons or gallons (specify)	
		Digestate Separated Solids	13259 tons (solids)	
		Digestate Strata Sound	gallons (liquids)	
		Litter	tons	
		Other Wastewater Specify:	gallons	
•	Э.	Describe alternative use(s) of manure, digestate, litter or other	wastewater, if any:	
			N A	
			*	

Part VII: Activity Specific Information (continued)

3. TYPE OF CONTAINMENT, STORAGE AND CAPACITY:				
Type of Storage	Total Number of Days of Storage	Total Capacity (specify gallons or tons)		
☐ Anaerobic Lagoon				
Storage Lagoon Gilage		*		
Aboveground Storage Tanks	75 days	2.4 million gal		
Belowground Storage Tanks	3 day 5	100,000 gal		
Roofed Storage Shed (2)	2 days			
☐ Concrete Pad				
☐ Under Floor Pit				
Other: Specify:		y 1		
Total number of acres exposed to precipitation that drain structure(s) reported in the table above: Output Description of acres exposed to precipitation that drain structure(s) reported in the table above: Output Description of acres exposed to precipitation that drain structure(s) reported in the table above:	9	ainment and storage		
 4. COMPREHENSIVE NUTRIENT MANAGEMENT PLAN: a. Has the registrant attached a Comprehensive Nutrient Management Plan?				
d. When was the last review or revision of the Cor	nprehensive Nutrient Managem	ent Plan? Date: 6/2023		
e. If not land applying, describe alternative use(s) of manure, digestate, litter, and/or wastewater:				
		,		

Part VIII: Supporting Documentation

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.) and be sure to include the registrant's name as indicated on this registration form.

	Attachment A:	Coastal Consistency Review Form (DEEP-APP-004), if applicable.
	Attachment B:	A copy of the NDDB Determination response letter that has not expired, if applicable. Include a copy of any mitigation measures developed for this activity and approved by NDDB. Do <i>not</i> submit any NDDB Preliminary Site Assessments with your registration. Be aware that you must renew your NDDB Determination if it expires before project work commences.
	Attachment C:	Conservation or Preservation Restriction Information, in applicable. N/A
	Attachment D:	A topographic map of the geographic area in which the CAFO is located showing the specific location of the production area and one mile beyond the property boundaries of the CAFO depicting the facility, each discharge location, wells, springs, surface water bodies and drinking water wells listed in public records or otherwise known to the registrant in the map area.
V	Attachment E:	Comprehensive Nutrient Management Plan on Flash drive
	Attachment F:	NetDMR Subscriber Agreement

Part IX: Registrant Certification

The registrant must sign this part. A registration will be considered insufficient without this certification.

"I have personally examined and am familiar with the information submitted in this registration, including all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

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 Connecticut General Statutes, pursuant to 53a-157b of the Connecticut General Statutes, and in accordance with any other applicable statute.

I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text;

I also certify under penalty of law that I have read the General Permit for Concentrated Animal Feeding Operations issued by the Commissioner on December 6, 2022; that the discharges which are the subject of this registration are eligible for authorization under such permit; and that I will comply with all schedules and applicable requirements of such permit, including the development and implementation of a site-specific Comprehensive Nutrient Management Plan, reviewed and signed by a Certified Agricultural Planning Specialist."

Signature of Registrant	Enter Date. /2/19/2023
Enter Name Name of Registrant (print or type)	Enter Title Title (if applicable)

Part X: Preparer Certification

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. If the registrant is the preparer, please mark N/A in the spaced provided for the preparer.

"I have personally examined and am familiar with the information submitted in this registration, including all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.		
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 Connecticut General Statutes, pursuant to 53a-157b of the Connecticut General Statutes, and in accordance with any other applicable statute.		
I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text;		
I also certify under penalty of law that I have read the General Permit for Concentrated Animal Feeding Operations issued by the Commissioner on December 6, 2022 and that the discharges which are the subject of this registration are eligible for authorization under such permit."		
	*	
	Enter Date	
Signature of Preparer (if different than above)	Date	
	-	
	s .	
Enter Name	Enter Title	
Name of Preparer (print or type)	Title (if applicable)	
	,	
Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet. Signatures of any person preparing any report or parts thereof required in this registration (i.e., professional engineers, surveyors, soil scientists, consultants, etc.) must be included.		

This completed registration form and all supporting materials (along with the fee) are to be submitted to:

Central Permit Processing Unit
Department of Energy and Environmental Protection
79 Elm Street
Hartford, CT 06106-5127

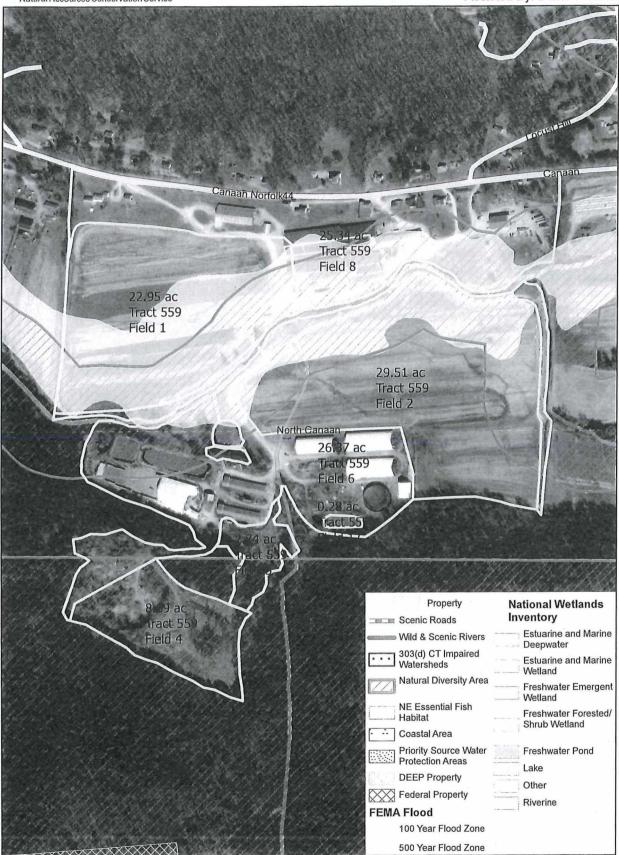
An electronic copy of this registration and all attachments must also be submitted to: CAFO.Coordinator@ct.gov



Resource Map

Date: 12/11/2023

Agency: USDA NRCS Assisted By: David Hussong





Prepared with assistance from the USDA Natural Resources Conservation Service



Clients Name: LAURELBROOK FARM Address: 390 NORFOLK RD

EAST CANAAN, CT 06024

Tract: 559 Aprox. Acre: 47



C	PPU USE ONLY
Арр #:	
Doc #:	
Check #: No fe	e required
Program: Natu Endangered Spe	ıral Diversity Database ecies
Hardcopy	Electronic

Request for Natural Diversity Data Base (NDDB) State Listed Species Review

This form was auto-populated with information provided through the DEEP ezFile portal NDDB review application. **There are no fees associated with NDDB Reviews.**

Part I: Preliminary Screening & Request Type

Tarti. Tremimary Screening & Nequest Type		
Before submitting this request, you must review the most current Natural Diversity Data Base "State and Federal Listed Species and Significant Natural Communities Maps" found on the <u>DEEP website</u> . These maps are updated twice a year, usually in June and December.		
This form is being submitted for a:		
 ☑ New NDDB request ☐ Renewal of a NDDB Request without modifications and within two years of issued NDDB determination (no attachments 	□ New Safe Harbor Determination; must be associated with an application for a GP for the Discharge of Stormwater and Dewatering Wastewaters from Construction Activities (Attachment D of this form is required)	
required)	 □ Renewal/Extension of an existing Safe Harbor □ Determination □ With modifications 	
[CPPU Use Only - NDDB-Listed Species Determination # 1736]	☐ Without modifications (no attachments required) [CPPU Use Only - NDDB-Safe Harbor Determination # 1736]	
Enter NDDB Determination Number for Renewal:	Enter Safe Harbor Determination Number for Renewal/Extension:	
Does your project utilize federal funds or require a federal permit? ✓ Yes □ No If yes, your project may be subject to Federal rules regarding the Northern long-eared bats or other federally listed species. Information on the Northern long-eared bat and the 4-D rule may be found at:		
http://www.fws.gov/midwest/endangered/mammals/nleb/ Information on other federally listed species and Section 7 consultations may be found at: https://www.fws.gov/newengland/EndangeredSpec-Consultation.htm		

2. Does your project utilize state funding, involve state agency actions, or relate to a CEPA request? ☐ Yes ☑ No		
3. Does your project require state permits, licenses, registrations or authorizations? ⊠ Yes ☐ No If yes, list permit type(s): Other DEEP Permit or Authorization {Large CAFO Permit (New Filing)}		
If an active enforcement action exists regarding this project, enter number: If known, enter DEEP analysts reviewing this project:		

II: Requester Information

*If the requester is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, it must be registered with the Secretary of the State. If applicable, the name shall be stated **exactly** as it is registered with the Secretary of the State. Please note, for those entities registered with the Secretary of the State, the registered name will be the name used by DEEP. This information can be accessed at the Secretary of the State's Business Records Search. (https://service.ct.gov/business/s/onlinebusinesssearch)

If the requester 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.

	to the during of the form.			
1.	Requester*			
	Company Name: Laurelbrook Farm	Contact Name: James Jacquier		
	Address: 390 Norfolk Rd	City/Town: East Canaan		
	State: CT	Zip Code: 06024		
	Business Phone: 8603073001 Ext:	**E-mail:		
	this electronic address, concerning this request. F	g to receive official correspondence from the department, at Please remember to check your security settings to be sure Also, please notify the department if your e-mail address		
a)	Requester can best be described as:			
	□ Individual □ Federal Agency □ State agency			
	☐ Municipality ☐ Tribal ☐ *business entit	y (* 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 the Secretary of the
State's Business Records Search (https://s		service.ct.gov/business/s/onlinebusinesssearch)
iii) Check here if your business is NOT registere		d with the Secretary of the State's office.
Acting as (Affiliation), pick one:		
☐ Property owner	□ Consultant	□Engineer
☐ Facility owner	⊠ Applicant	□ Biologist
☐ Pesticide Applicator		☐ Other representative:
	ii) Provide Secretary of the State B State's Business Records S iii) Check here if your business is Acting as (Affiliation), pick one: □ Property owner □ Facility owner	ii) Provide Secretary of the State Business ID #: State's Business Records Search (https://s iii) Check here if your business is NOT registere Acting as (Affiliation), pick one: □ Property owner □ Consultant □ Facility owner □ Applicant

Part III: Site Information

This request can only be completed for one site. A separate request must be filed for each additional site.

SITE NAME AND LOCATION	#
Project Name (for use in correspondence): CAFO Permit 2023	
If your Project site has a street address, please enter below:	
Street Address: 390 Norfolk Road	
Town(s): North Canaan	
If your Project has no street address, please enter a description of the site location:	
Location Description:	
Town(s):	
Size in acres, or site dimensions: 22.96	-
Describe existing land conditions:	40
Large CAFO - dairy cows/heifers and crop fields	

Part IV: Project Information

1.	Project Type:
	Choose Project Category: Natural Resource/Site Management
	Choose Project Type: Special Use License Request (for DEEP use only)
	Choose Project Subtype: Special Use License Request (for DEEP use only)
2.	Brief Project Description:
3.	Provide a schedule for all phases of the project including the year, the month that the proposed activity will be initiated and the duration of the activity.
	n/a
4.	Is the subject activity limited to the maintenance, repair, or improvement of an existing structure within the existing footprint? \square Yes \boxtimes No If yes, add explanation in No. 4 below.
5.	Give a detailed description of the activity which is the subject of this request and describe the methods and equipment that will be used. Include a description of steps that will be taken to minimize impacts to any known listed species.
	CAFO Permit Filing
6.	If this is a renewal or extension of an existing Safe Harbor request <i>with</i> modifications, explain what about the project has changed.

Part VI: Supporting Documents

Check each attachment submitted as verification that *all* applicable attachments have been supplied with this request form. Label each attachment as indicated in this part (e.g., Attachment A, etc.) and be sure to include the requester's name, site name and the date. Please note that Attachments A and B are required for all new requests. Attachment C is required for requests associated with: new state or federal permit applications, modifications of existing permits, permit enforcement actions, site management/planning that requires details species recommendations, and state funded projects, state agency activities, and CEPA requests. Renewals/Extensions with no modifications do not need to submit any attachments. Attachments C and D are supplied at the end of this form.

⊠ Attachment A:	Project Detail Map: an 8 1/2" X 11" print/copy of the relevant portion of a USGS Topographic Quadrangle Map clearly indicating the exact location of the site.
☑ Attachment B:	GIS file (for uploaded GIS polygons): fine scaled map showing site boundary and area of work details on aerial imagery with relevant landmarks labeled. (Site and work boundaries in GIS [ESRI ArcView shapefile, in NAD83, State Plane, feet] format can be substituted for detailed maps, see instruction document)
☐ Attachment C:	Supplemental Information (attached, DEEP-APP-007C): Site plans, photographs and biological reports
☐ Attachment D:	Safe Harbor Report Requirements (attached, DEEP-APP-007D)

Part VII: Requester Certification

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

"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."		
Ammirato Sarah	12/14/2023	
Signature of Preparer (a typed name will substitute for a handwritten signature)	Date	
> *		
Ammirato Sarah	Soil Conservationist USDA NRCS	
Name of Preparer (print or type)	Title (if applicable)	
SARAH AMMIRATO Digitally signed by SARAH AMMIRATO Date: 2023.12.14 16:22:25 -05'00'		
Signature of Preparer (if different than above)	Date	
Name of Preparer (print or type)	Title (if applicable)	

Note: Please submit the completed Request Form and all Supporting Documents to:

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

Or email request to: deep.nddbrequest@ct.gov

Attachment C: Supplemental Information and Attachments

1.	Existing & Proposed Conditions
	If available provide site plans, drawings or imagery showing existing conditions and proposed changes. If not available, describe all natural and man-made features including wetlands, watercourses with direction of flow, fish and wildlife habitat, floodplains and any existing structures potentially affected by the subject activity. Such features should be depicted and labeled on the site plan.
	☐ Annotated Site Plan(s) attached
2.	Photographs depicting site conditions can be helpful to reviewers. Provide and label photographs, if available.
	☐ Site Photographs (optional) attached
3.	Biological Surveys
	Has a biologist visited the site and conducted a biological survey to determine the presence of any endangered, threatened or special concern species \square Yes \square No
	If yes, submit any reports of biological surveys, documentation of the biologist's qualifications, and any NDDB survey forms. Reports should include biologist(s) name, habitat and/or species targeted by survey, plant and animal species observed, dates when surveys were conducted.
	□ Reports of biological surveys attached
	□ Documentation of biologist's qualifications attached
	□ <u>NDDB Survey forms</u> for any listed species observations attached
	* 1

Attachment D: Safe Harbor Report Requirements

Submit a report, as Attachment D, that synthesizes and analyzes the information listed below. Those providing synthesis and analysis need appropriate qualifications and experience. A request for a safe harbor determination shall include:

- 1. Habitat Description and Map(s), including GIS mapping overlays, of a scale appropriate for the site, identifying:
 - wetlands, including wetland cover types;
 - plant community types;

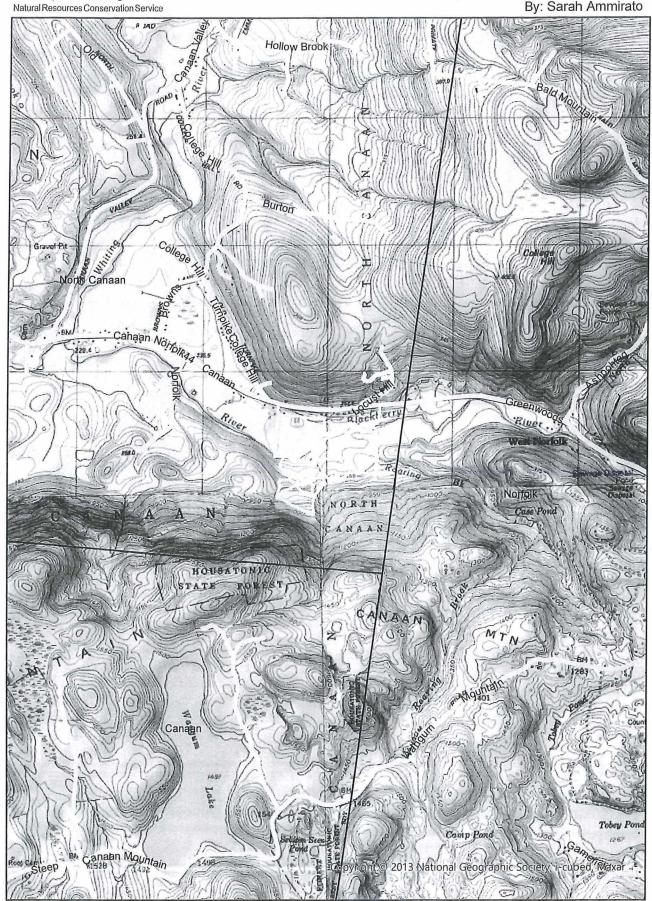
- topography;
- soils;
- bedrock geology;
- floodplains, if any;
- land use history; and
- water quality classifications/criteria.
- 2. Photographs The report should include photographs of the site taken from the ground and also all reasonably available aerial or satellite photographs and an analysis of such photographs.
- **3. Inspection** A visual inspection(s) of the site should be conducted, preferably when the ground is visible, and described in the report. This inspection can be helpful in confirming or further evaluating the items noted above.
- 4. Biological Surveys The report should include all biological surveys of the site where construction activity will take place that are reasonably available to a registrant. A registrant shall notify the Department's Wildlife Division of biological studies of the site where construction activity will take place that a registrant is aware of but are not reasonably available to the registrant.
- 5. Based on items #1 through 4 above, the report shall include a Natural Resources Inventory of the site of the construction activity. This inventory should also include a review of reasonably available scientific literature and any recommendations for minimizing adverse impacts from the proposed construction activity on listed species or their associated habitat.
- 6. In addition, to the extent the following is available at the time a safe harbor determination is requested, a request for a safe harbor determination shall include and assess:
 - Information on Site Disturbance Estimates/Site Alteration information
 - Vehicular Use
 - · Construction Activity Phasing Schedules, if any; and
 - Alteration of Drainage Patterns



Topographic Map

Date: 12/11/2023

Agency: USDA NRCS Assisted By: Sarah Ammirato





Prepared with assistance from the USDA Natural Resources Conservation Service

 Clients Name: Laurelbrook Farms LLC Address: 390 NORFOLK RDEAST CANAAI

Feet Tract: 2753



Connecticut Department of Energy & Environmental Protection

Bureau of Materials Management & Compliance Assurance Water Permitting & Enforcement Division

General Permit Registration Form for Concentrated Animal Feeding Operations (CAFO)

Please complete this form in accordance with the <u>instructions</u> to ensure the proper handling of your registration. Please print or type unless otherwise noted. A Comprehensive Nutrient Management Plan (CNMP) and the Registration Fee must be submitted with this Registration.

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App #:		
Doc #:		THE THE REST COME SEE
Check #:		n disejanjaje 1992. j
Prog	ram: Ag	riculture Permits

Part I: Registration Type and Fee Information

Check all appropriate boxes to identify the registration type:	Fees:	
☐ Small CAFO		
☐ New registration	\$100.00 [#2358]	
Modification of Registration and/or CNMP: Permit No	\$0 [#2361]	
☐ Medium CAFO		
☐ New registration	\$250.00 [#2359]	
Modification of Registration and/or CNMP: Permit No	\$0 [#2361]	
☐ Large CAFO		
New registration	\$500.00 [#2360]	
Modification of Registration and/or CNMP: Permit No. 202309498	\$0 [#2361]	
Town Location:		
This 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 or by such other method as the commissioner may allow.		

Part II: Surrender or Withdrawal of Existing Permit or Application

1.	If you currently hold an individual permit for the discharge(s) you are registering, you must request to surrender the individual permit to be authorized under the subject general permit.		
	a. Do you request to surrender your individual permit?b. If yes, please provide your individual permit number:		
2.	If you currently have a pending individual permit application for discharge(s) you are registering, you must withdraw your individual permit application to be authorized under the subject general permit. a. Do you request to withdraw your individual permit application? Yes No b. If yes, please provide your application number:		

Part III: Registrant Information

If a registrant 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. (onlineBusinessSearch (ct.gov))

If a registrant 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 DEEP.OPPD@ct.gov . For any other changes, contact the specific program from which you hold a current DEEP license.

1.	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 electronic address, concerning the subject registration. Pleasure you can receive e-mails from "ct.gov" addresses. Also,	se remember to	check your security settings to be
2.	Billing contact name (if different than the registrant):		
	Mailing Address:		
	City/Town:	State:	Zip Code:
	Business Phone:	ext.:	
	Contact Person:	Phone:	ext.
	*E-mail:		

Part IX: Registrant Certification

The registrant must sign this part. A registration will be considered insufficient without this certification.

"I have personally examined and am familiar with the information submitted in this registration, including all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

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 Connecticut General Statutes, pursuant to 53a-157b of the Connecticut General Statutes, and in accordance with any other applicable statute.

I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text:

I also certify under penalty of law that I have read the General Permit for Concentrated Animal Feeding Operations issued by the Commissioner on December 6, 2022; that the discharges which are the subject of this registration are eligible for authorization under such permit; and that I will comply with all schedules and applicable requirements of such permit, including the development and implementation of a site-specific Comprehensive Nutrient Management Plan, reviewed and signed by a Certified Agricultural Planning Specialist."

Sighature of Registrant	Enter Date. 2/1/2024
Signature of Registrant	Date
	- 4.10
Enter Nawares Jacquier	Enter Title Member
Name of Registrant (print or type)	Title (if applicable)

Part X: Preparer Certification

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. If the registrant is the preparer, please mark N/A in the spaced provided for the preparer.

"I have personally examined and am familiar with the information submitted in this registration, including all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of those individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

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 Connecticut General Statutes, pursuant to 53a-157b of the Connecticut General Statutes, and in accordance with any other applicable statute.

I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text;

I also certify under penalty of law that I have read the General Permit for Concentrated Animal Feeding Operations issued by the Commissioner on December 6, 2022 and that the discharges which are the subject of this registration are eligible for authorization under such permit."

of this registration are eligible for authorization under such permit."		
Signature of Preparer (if different than above)	Enter Date 2/1/2029 Date	
Enter Name Sarah Ammiraho Name of Preparer (print or type)	Enter Title NRCS Soil Conservationi) Title (if applicable)	
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□ Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet. Signatures of any person preparing any report or parts thereof required in this registration (i.e., professional engineers, surveyors, soil scientists, consultants, etc.) must be included.

This completed registration form and all supporting materials (along with the fee) are to be submitted to:

Central Permit Processing Unit
Department of Energy and Environmental Protection
79 Elm Street
Hartford, CT 06106-5127

An electronic copy of this registration and all attachments must also be submitted to: CAFO.Coordinator@ct.gov





1/10/2024

Sarah Ammirato LAUREL BROOK FARM 390 Norfolk Rd East Canaan, CT 06024 sarah.ammirato@usda.gov

Subject: CAFO Permit 2023

Filing #: 104718

NDDB - New Determination Number: 202309410

Expiration Date: 1/10/2026

Location: 390 Norfolk Rd, North Canaan, CT

I have reviewed Natural Diversity Database (NDDB) maps and files regarding this project. According to our records, there are State-listed species (RCSA Sec. 26-306) that are nearby that may be affected by project activities.

Slimy sculpin (Cottus cognatus)

DEEP Fisheries Biologists review permit applications submitted to DEEP regulatory programs to determine whether projects might adversely affect listed species. You do not need to follow up with NDDB regarding fish protection. Please complete the <u>DEEP Fisheries consultation form</u> and submit to: <u>Deep.inland.fisheries@ct.gov</u> for your consultation.

Your submission information indicates that your project requires a state permit, license, registration, or authorization, or utilizes state funding or involves state agency action. This NDDB - New determination may be utilized to fulfill the Endangered and Threatened Species requirements for state-issued permit applications, licenses, registration submissions, and authorizations.

Please be aware of the following limitations and conditions:

Natural Diversity Database information includes all information regarding listed species available to us at the time of the request. This information is a compilation of data collected over the years by the Department of Energy and Environmental Protection's Natural History Survey and cooperating units of DEEP, land owners, private conservation groups and the scientific community. This information is not necessarily the result of comprehensive or site-specific field investigations. Current research projects and new contributors continue to identify additional populations of species and locations of habitats of concern, as well as enhance existing data. Such new information is incorporated into the Database and accessed through the ezFile portal as it becomes available. New information may result in additional review, and new or modified restrictions or conditions may be necessary to remain in compliance with certain state permits.

- During your work listed species may be encountered on site. A report must be submitted by the
 observer to the Natural Diversity Database promptly and additional review and restrictions or conditions
 may be necessary to remain in compliance with certain state permits. Please fill out the appropriate
 survey form and follow the instructions for submittal.
- Your project involves the state permit application process or other state involvement, including state funding or state agency actions; please note that consultations with your permit analyst or the agency may result in additional requirements. In this situation, additional evaluation of the proposal by the DEEP Wildlife Division may be necessary and additional information, including but not limited to species-specific site surveys, may be required. Any additional review may result in specific restrictions or conditions relating to listed species that may be found at or in the vicinity of the site.
- If your project involves preparing an Environmental Impact Assessment, this NDDB consultation and determination should not be substituted for biological field surveys assessing on-site habitat and species presence.
- The NDDB New determination for the CAFO Permit 2023 as described in the submitted information and summarized at the end of this document is valid until 1/10/2026. This determination applies only to the project as described in the submission and summarized at the end of this letter. Please re-submit an updated Request for Review if the project's scope of work and/or timeframe changes, including if work has not begun by 1/10/2026.

If you have further questions, please contact me at the following:

Shannon Kearney
CT DEEP Bureau of Natural Resources
Wildlife Division
Natural Diversity Database
79 Elm Street
Hartford, CT 06106-5127
(860) 424-3170
Shannon.Kearney@ct.gov

Please reference the Determination Number 202309410 when you e-mail or write. Thank you for consulting the Natural Diversity Data Base.

Shannon Kearney
Wildlife Division- Natural Diversity Data Base
79 Elm Street
Hartford, CT 06106-5127
(860) 424-3170
Shannon.Kearney@ct.gov