**INTERDEPARTMENTAL STATE OF CONNECTICUT**

# MESSAGE

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| To | NAME, TITLE  Central Permit Processing Unit, 1st Floor | DATE [DATE] |
| AGENCY, ADDRESS  Department of Energy and Environmental Protection, 79 Elm Street, Hartford, CT 06106 | |
| From | NAME, TITLE  Kevin F. Carifa, Transportation Planning Director | TELEPHONE  860-594-2946 |
| AGENCY, ADDRESS  Department of Transportation, 2800 Berlin Turnpike, Newington, CT 06131-7546 | |

Subject: **State Project No. [####-####]**

**[**Replacement/Rehabilitation] of Bridge No. [#####]

Route ### over [water course]

[City/Town] of [municipality]

Attached is an original copy of the DEEP Land & Water Resources Division (LWRD) Transmittal Form associated with the above referenced project. The permits applications being submitted with this Transmittal Form include: [LIST PERMIT TYPES].

[For any 401-permit, include the following:

The project proponent hereby certifies that all information contained herein is true, accurate, and complete to the best of my knowledge and belief. The project proponent hereby requests that the certifying authority review and take action on this CWA 401 certification request within the applicable reasonable period of time.]

**For planning purposes, please be aware the project’s Final Design Plan (FDP) milestone date is [FDP DATE].** In order for the project to meet its bid, advertise and contract award dates, final permits should be issued by the FDP date. Meeting this date will ensure that the project’s funds are expended within Federal and State contracting timeframes and the appropriate species and wildlife time of year restrictions can be incorporated as planned in the project schedule. Please consider this project’s FDP relative to other pending permits under review. The respective LWRD supervisor has access to schedule updates from the DOT.

[For this project, DEEP Fisheries has advised \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, which differs from the standard condition in LWRD licenses. Please consider a special condition in the license that reflects the related correspondence in Attachment ## of the application.]

Any questions pertaining to this application may be directed to Amanda M. Saul, Transportation Supervising Planner, of my staff at [amanda.saul@ct.gov](mailto:amanda.saul@ct.gov) or 860-594-2939.

Attachments

bcc: Kevin F. Carifa – Amanda M. Saul – [EPU Planner]

[Principal Engineer] – [Transportation Supervising Eng.] – [Trans. Eng 3]

[DOT.ConstrD#@ct.gov]

[H&D Principal Engineer]