



Connecticut
Department of Energy &
Environmental Protection

Permit Application for Stationary Sources of Air Pollution - New Source Review

Please complete this form in accordance with the [instructions](#) (DEEP-NSR-INST-200) to ensure the proper handling of your application. Print or type unless otherwise noted. You must submit the permit application fee(s), a copy of the published notice of permit application, and the [Certification of Notice Form](#) (DEEP-APP-005A) along with this form.

Note: If you are applying for a *minor modification* or a *revision* to an existing New Source Review permit, please use the appropriate [Minor Modification Application Form](#) (DEEP-NSR-APP-200MM) or [Revision Application Form](#) (DEEP-NSR-APP-200R).

Questions? Visit the [Air Permitting](#) web page or contact the Air Permitting Engineer of the Day at DEEP.BAM.AirPermits@ct.gov or 860-424-4152.

Applicant Name:		Town Where Site is Located:	
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Part I: Application and Source Type Summary

More than one permit may be applied for using one application form if the sources are located at the same premises. Complete and attach the appropriate supplemental application forms for each unit included in this application package. *Each* unit or process line requires a separate permit.

Unit No.	Source Type	Application Type	Existing Town-Permit or Registration Nos. (If applicable)	DEEP Use Only	
				Application No.	Permit No.
		<input type="checkbox"/> New <input type="checkbox"/> Non-Minor Mod			
		<input type="checkbox"/> New <input type="checkbox"/> Non-Minor Mod			
		<input type="checkbox"/> New <input type="checkbox"/> Non-Minor Mod			
		<input type="checkbox"/> New <input type="checkbox"/> Non-Minor Mod			
		<input type="checkbox"/> New <input type="checkbox"/> Non-Minor Mod			
		<input type="checkbox"/> New <input type="checkbox"/> Non-Minor Mod			

☐ Check here if additional sheets are necessary to identify all sources that are included in this application package, and label and attach them to this sheet.

Brief Description of Project:	
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Part II: Fee & Public Notice Information

1. FEE INFORMATION		
<p>A permit application fee of \$940.00 [#195] is to be submitted with this application form for each source listed in Part II. For municipalities, as defined in CGS section 22a-170, a 50% reduction applies. The application will not be processed until the application fee is received. The fee shall be paid by check or money order to the Department of Energy and Environmental Protection or through the E-Payment portal.</p> <p>The permit fee(s) will be calculated subject to the provisions of RCSA section 22a-174-26 and billed at a later date.</p>	Number of Sources from Part I	
	Application Fee per source	\$940
	Municipality	<input type="checkbox"/> No <input type="checkbox"/> Yes, 50% disc.
	Total Enclosed	
	Are you paying online through the E-Payment portal? After the application is received and entered, pay instructions will be emailed to the Primary/Billing Contact listed	<input type="checkbox"/> No <input type="checkbox"/> Yes
2. PUBLIC NOTICE INFORMATION		
<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 public notice of application and the completed Certification of Notice Form (DEEP-APP-005A) must be included as Attachment AA to this application. Your application will not be processed if Attachment AA is not included.</p> <p>The applicant is responsible for publishing legal notice in accordance with the requirements of CGS section 22a-6g, and all applicable laws.</p>	Date of Publication	

Part III: 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, the applicant'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 ([Connecticut Business Records Search](#)).*
- 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 Innovative Partnerships and Planning (OPPD) at DEEP.OPPD@ct.gov. For any other changes you must contact the specific program from which you hold a current DEEP license.*

1. APPLICANT INFORMATION					
Applicant Name	Check at least one: <input type="checkbox"/> equipment owner <input type="checkbox"/> equipment operator <i>The applicant must be either the owner or operator of the equipment.</i>				
Mailing Address					
City/Town		State		Zip Code	
Business Phone No.		Extension No.			
Contact Person					
Title					
Email					
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.					

Part III: Applicant Information (continued)

Applicant Type	<input type="checkbox"/> business entity <input type="checkbox"/> municipality <input type="checkbox"/> individual <input type="checkbox"/> federal agency <input type="checkbox"/> state agency <input type="checkbox"/> tribal					
	If a business entity:	Business Type	<input type="checkbox"/> corporation <input type="checkbox"/> limited liability company <input type="checkbox"/> limited partnership <input type="checkbox"/> limited liability partnership <input type="checkbox"/> statutory trust <input type="checkbox"/> Other:			
		Secretary of the State business ID No.	<input type="checkbox"/> Check here if your business is NOT registered with the Secretary of State's office.			
		This information can be accessed at the Secretary of State's database (Connecticut Business Records Search).				
Applicant's interest in property at which the proposed activity is to be located	<input type="checkbox"/> site owner <input type="checkbox"/> option holder <input type="checkbox"/> lessee <input type="checkbox"/> easement holder <input type="checkbox"/> Other:					
Are there co-applicants?	<input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", attach additional sheet(s) with the required information as above.					
Did the Applicant attend a Pre-Application Meeting with DEEP air staff?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Pre-Application Meeting: Date of Meeting: Air Staff Name(s): <input type="checkbox"/> Single Permit <input type="checkbox"/> Multiple Permits					
2. BILLING CONTACT (If different than the applicant)						
Name						
Mailing Address						
City/Town		State		Zip Code		
Contact Person						
Business Phone No.		Extension No.				
Email						
3. PRIMARY CONTACT FOR DEPARTMENTAL CORRESPONDENCE AND INQUIRIES (if different than the applicant)						
Name						
Title						
Company/Individual Name						
Mailing Address						
City/Town		State		Zip Code		
Business Phone No.		Extension No.				
Email						
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.						

Part III: Applicant Information (continued)

4. EQUIPMENT OWNER OR EQUIPMENT OPERATOR (Only complete if applicant is not both equipment owner and operator)					
Name	Check one: <input type="checkbox"/> equipment owner <input type="checkbox"/> equipment operator				
Title					
Company/Individual Name					
Mailing Address					
City/Town		State		Zip Code	
Business Phone No.		Extension No.			
Email					
5. ENGINEER(s) OR CONSULTANT(s) EMPLOYED OR RETAINED TO ASSIST IN PREPARING THIS APPLICATION (If different than the applicant)					
Name					
Title					
Company/Individual Name					
Mailing Address					
City/Town		State		Zip Code	
Business Phone No.		Extension No.			
Email					
Service Provided					

☐ Check here if additional sheets are necessary. 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
2. SITE OWNERSHIP INFORMATION				
For site locations that <i>do not</i> currently have an air permit or registration associated with it:				
Please provide the date the owner or operator established a presence at this site.				
For site locations that <i>do</i> currently have an air permit or registration associated with it:				
Does this site have a new owner or operator?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, is this new owner or operator replacing the existing owner of the site or will it be co-located with the existing owner?		<input type="checkbox"/> Replacing <input type="checkbox"/> Co-Located		
If yes, please provide the date the new owner or operator established a presence at this site.				
3. TRIBAL RESERVATION LANDS				
Will the activity which is the subject of this application be located on federally recognized tribal reservation lands? Refer to EPA's Region 1 Tribal Program to confirm.		<input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", permit applicants should contact EPA's Region 1 Tribal coordinator if they are proposing development on a federal reservation.		
Will the activity which is the subject of this application be located on state recognized tribal reservation lands?		<input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes", state permits may be required. Please contact CT DEEP Tribal Affairs for potential permitting requirements.		
4. COASTAL MANAGEMENT ACT CONSISTENCY				
Is or will the activity which is the subject of this application be located within the coastal boundary as delineated on DEEP approved coastal boundary maps? 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).		<input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes", Is this an application for a new permit or a modification of an existing permit where the physical footprint of the subject activity is modified?		<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, <u>and</u> if the activity which is the subject of this application is located within the coastal boundary as delineated on DEEP approved coastal boundary maps, you must complete and submit a Coastal Consistency Review Form (DEEP-APP-004) with your application as Attachment O.		
If the activity is not located within the coastal boundary, is the activity which is the subject of this application located within the coastal area? (see town list in the instructions)		<input type="checkbox"/> Yes <input type="checkbox"/> No		

Part IV: Site Information (continued)

5. NATURAL DIVERSITY DATA BASE (NDDDB) - ENDANGERED AND THREATENED SPECIES	
<p>According to the most current Natural Diversity Data Base Areas Maps, will the activity which is the subject of this application, including all impacted areas, be located within an area identified as, or otherwise known to be, a habitat for state listed endangered, threatened or special concern species?</p> <p>Impacted areas include, but are not limited to the following: limits of a dam, impoundment area, downstream flow areas, access roads, mobilization areas, and any other areas within the vicinity of the proposed work.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date of Map:</p> <p>If yes, complete and submit a Natural Diversity Data Base Review Request using the DEEP's ezFile portal (filings.deep.ct.gov/DEEPPortal/). To get started, create a user account and start a new NDDDB filing. Additional information about this new filing process can be found on the NDDDB website. All requests for review must go through the new NDDDB portal. Email deep.nddbrequest@ct.gov if you need help.</p> <p>Please note if NDDDB biologist review is required, it may take 6 to 8 weeks and may require the applicant to produce additional documentation, such as ecological surveys, which must be completed prior to submitting this permit application.</p> <p>A copy of the NDDDB Determination response letter that has not expired must be submitted with this completed application as Attachment P. Include a copy of any mitigation measures developed for this activity and approved by NDDDB. Be aware that you must renew your NDDDB Determination if it expires before project work commences.</p>
6. AQUIFER PROTECTION AREAS	
<p>Is the site located within a mapped Level A or Level B Aquifer Protection Area, as defined in CGS sections 22a-354a through 354bb?</p>	<p><input type="checkbox"/> Level A <input type="checkbox"/> Level B <input type="checkbox"/> No</p> <p>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.</p>
<p>If Level A, are any of the regulated activities, as defined in RCSA section 22a-354i-1(34), conducted on this site?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, and your business is not already registered with the Aquifer Protection Program, contact local aquifer protection agent or DEEP to take appropriate actions.</p>
7. CONSERVATION OR PRESERVATION RESTRICTION	
<p>Is the premises subject to a conservation or preservation restriction?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>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 Q.</p>

Part IV: Site Information (continued)

8. AFFECTING FACILITY/ENVIRONMENTAL JUSTICE COMMUNITY	
Will the activity which is the subject of this application include an affecting facility as defined in the Environmental Justice Public Participation Guidelines (Guidelines)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, is the site located within an Environmental Justice Community , as defined in the Environmental Justice Public Participation Guidelines (Guidelines) and within this map ?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, and this application is for a new or expanded permit, prior to submitting this application prepare an Environmental Justice Public Participation Plan (DEEP-EJ-PLAN-001) in accordance with the Guidelines and submit such plan to: Office of Environmental Equity Office of the Commissioner Department of Energy and Environmental Protection 79 Elm Street Hartford, CT 06106-5127 Once you have received written approval for your Environmental Justice Public Participation Plan from DEEP, submit this completed application with a copy of the Plan approval as Attachment R.
9. AIR QUALITY STATUS	
Indicate the air quality status of the area in which the premises is or will be located. (See instructions for the air quality attainment status of Connecticut municipalities).	Ozone: <input type="checkbox"/> Severe Non-Attainment <input type="checkbox"/> Serious Non-Attainment
10. MAJOR STATIONARY SOURCE	
Is the premises a major stationary source?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate the pollutant(s), if any, for which the premises exceeds the major stationary source threshold: <input type="checkbox"/> PM <input type="checkbox"/> PM ₁₀ <input type="checkbox"/> PM _{2.5} <input type="checkbox"/> SO ₂ <input type="checkbox"/> NO _x <input type="checkbox"/> CO <input type="checkbox"/> VOC <input type="checkbox"/> Pb <input type="checkbox"/> CO ₂ <input type="checkbox"/> HAPs
Is the premises operating in accordance with the provisions of RCSA §22a-174-33a <i>Limit on Premises-Wide Actual Emissions Below 50% of Title V Source Thresholds</i> or RCSA §22a-174-33b <i>Limit on Premises-Wide Actual Emissions Below 80% of Title V Source Thresholds</i> ?	<input type="checkbox"/> Yes, RCSA §22a-174-33a <input type="checkbox"/> Yes, RCSA §22a-174-33b <input type="checkbox"/> No
11. SIC CODES	Primary Secondary Other Other
12. NAICS CODE	

Part V: Attachments

Check the applicable box below for each attachment being submitted with this application 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 applicant's name as indicated on this application form.

All referenced forms may be accessed electronically, in WORD and PDF versions, on the [Air Emissions Permits](#) webpage.

Attachment	Attachment Name	Form No.	Required?	Attached
AA	<i>Copy of the Published Public Notice of Application and Original Certification of Notice Form</i>	DEEP-APP-005A	Required	<input type="checkbox"/>
A	<i>Executive Summary</i>	DEEP-NSR-APP-222	Required	<input type="checkbox"/>
B	<i>Applicant Background Information</i>	DEEP-APP-008	Required	<input type="checkbox"/>
C	<i>Site Plan - An 8 ½" X 11" copy of the Site Plan</i>	<i>No DEEP form</i>	Required	<input type="checkbox"/>
D	<i>USGS Map - An 8 ½" X 11" copy of the relevant portion of a USGS Quadrangle Map indicating the exact location of the facility or site</i>	<i>No DEEP form</i>	Required	<input type="checkbox"/>
E	<i>Supplemental Application Forms</i>			--
	Select the appropriate forms for the source types listed in Part II of this form.	E201: <i>Manufacturing or Processing Operations</i>	If Applicable	<input type="checkbox"/>
		E201A: <i>Anaerobic Digestion Facility</i>	If Applicable	<input type="checkbox"/>
		E202: <i>Fuel Burning Equipment</i>	If Applicable	<input type="checkbox"/>
		E203: <i>Incinerators or Flares</i>	If Applicable	<input type="checkbox"/>
		E203A: <i>Crematory Units</i>	If Applicable	<input type="checkbox"/>
		E204: <i>Volatile Liquid Storage</i>	If Applicable	<input type="checkbox"/>
		E205: <i>Surface Coating or Printing Operations</i>	If Applicable	<input type="checkbox"/>
		E206: <i>Metal Plating or Surface Treatment Operations</i>	If Applicable	<input type="checkbox"/>
		E207: <i>Metal Cleaning Degreasers</i>	If Applicable	<input type="checkbox"/>
		E208: <i>Concrete, Asphalt Concrete, Mineral Processing or Other Similar Equipment</i>	If Applicable	<input type="checkbox"/>
		E209: <i>Site Remediation Equipment</i>	If Applicable	<input type="checkbox"/>
		E210: <i>Air Pollution Control Equipment</i>	If Applicable	<input type="checkbox"/>
		E211: <i>Stack Parameters</i>	Required	<input type="checkbox"/>
		E212: <i>Unit Emissions</i>	Required	<input type="checkbox"/>
F	<i>Premises Information Form</i>	DEEP-NSR-APP-217	Required	<input type="checkbox"/>
G	<i>BACT Determination Form</i>	DEEP-NSR-APP-214	If Applicable	<input type="checkbox"/>
H	<i>Major Modification Determination Form</i>	DEEP-NSR-APP-213	If Applicable	<input type="checkbox"/>
I	<i>Prevention of Significant Deterioration (PSD) of Air Quality Form</i>	DEEP-NSR-APP-216	If Applicable	<input type="checkbox"/>
J	<i>Non-Attainment Review Form</i>	DEEP-NSR-APP-215	If Applicable	<input type="checkbox"/>
K	<i>Operation and Maintenance Plan</i>	<i>No DEEP form</i>	If Applicable	<input type="checkbox"/>
L	<i>Ambient Air Quality Analysis Form</i>	DEEP-NSR-APP-218	Required	<input type="checkbox"/>
M	<i>Applicant Compliance Information</i>	DEEP-APP-002	Required	<input type="checkbox"/>

Part V: Attachments (continued)

Attachment	Attachment Name	Form No.	Required?	Attached
N	Marked Up Permit - For non-minor modifications, attach a marked up copy of the current NSR permit noting proposed changes	---	If Applicable	<input type="checkbox"/>
O	<i>Coastal Consistency Review Form</i>	DEEP-APP-004	If Applicable	<input type="checkbox"/>
P	Copy of Response to Request for Natural Diversity Data Base (NDDDB) State Listed Species Review Form and additional documentation	---	If Applicable	<input type="checkbox"/>
Q	Conservation or Preservation Restriction Information	<i>No DEEP form</i>	If Applicable	<input type="checkbox"/>
R	Copy of the Written Environmental Justice Public Participation Plan Approval Letter	---	If Applicable	<input type="checkbox"/>

Part VI: Applicant Certification

The authorized representative **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.

"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 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 any false statement made in the submitted information may be punishable as a criminal offense under section 22a-175 of the Connecticut General Statutes, under section 53a-157b of the Connecticut General Statutes, and in accordance with any applicable statute.

I certify that this application is on complete and accurate forms as prescribed by the commissioner without alteration of the text.

I certify that I have complied with all notice requirements as listed in section 22a-6g of the General Statutes.

By entering my name below, I agree that I am providing my legal signature and am legally bound by the certifications above"

APPLICANT:

Signature of Applicant		Date	
Name of Applicant (print or type)			
Title (if applicable)			

PREPARER:

Signature of Preparer		Date	
Name of Preparer (print or type)			
Title (if applicable)			

Submit one hardcopy and one electronic copy of the completed and signed application package.

The hardcopy of the completed and signed application package shall be submitted to:

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

The electronic copy of the completed and signed application form shall be submitted to:

DEEP.BAM.AirPermits@ct.gov. Where the file size of attachments exceed the allowable limit, please contact DEEP.BAM.AirPermits@ct.gov to arrange an alternate method of submitting the electronic copy.

Your application is not considered received by the Department until the hardcopy of the completed and signed application is submitted to the address above.

A copy of the published notice of the permit application must also be sent to the chief elected official of the municipality in which the regulated activity is proposed.