



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

# General Permit Registration Form to Construct and Operate a Commercial Facility for the Management of Recyclable Materials and Certain Solid Wastes

CPPU USE ONLY	
App #:	_____
Doc #:	_____
Check #:	_____
Programs: see below Transfer Station General Permit = TSGP Volume Reduction General Permit = VRGP	

Please complete this form in accordance with the [instructions](#) (DEEP-MM-INST-001) to ensure the proper handling of your registration. Print or type unless otherwise noted. You must submit the registration fee along with this completed form.

## Part I: Registration Type and Fee Information

1. Check the appropriate box(es) identifying the registration type(s) and fee(s). You can register for a maximum of five Solid Waste Facility Categories ("Facility Categories"). The appropriate fee is to be submitted for *each* new Facility Category that you are registering for or for *each* modification of an existing registration under a Facility Category (\*see item #4 for the definition of a modification). The registration will not be processed without the appropriate fee. The fee shall be non-refundable and shall be paid by check or money order to the Department of Energy and Environmental Protection (DEEP).

(a) New/ Addt'l	(b) *Mod	(c) Solid Waste Facility Category	(d) Fee				CPPU USE ONLY	
			New/Additional		Mod		Program	Application #
<input type="checkbox"/>	<input type="checkbox"/>	Asbestos Containing Materials (GP Apndx A)	\$1,250.00	[2035]	\$ 625	[2083]	TSGP	
<input type="checkbox"/>	<input type="checkbox"/>	Ash Residue (GP Apndx B)	\$1,250.00	[2036]	\$ 625	[2084]	TSGP	
<input type="checkbox"/>	<input type="checkbox"/>	Clean Wood: Tier III (GP Apndx C)	\$ 500.00	[2038]	\$ 250	[2085]	VRGP	
<input type="checkbox"/>	<input type="checkbox"/>	Clean Wood: Tier II (GP Apndx C)	\$ 250.00	[2037]	\$ 125	[2086]	VRGP	
<input type="checkbox"/>	<input type="checkbox"/>	Construction and Demolition Waste: Tier III (GP Apndx D)	\$1,250.00	[2040]	\$ 625	[2087]	VRGP	
<input type="checkbox"/>	<input type="checkbox"/>	Construction and Demolition Waste: Tier II (GP Apndx D)	\$ 500.00	[2039]	\$ 250	[2088]	VRGP	
<input type="checkbox"/>	<input type="checkbox"/>	Non-RCRA Hazardous Waste/Compatible Solid Wastes (GP Apndx E)	\$1,250.00	[2041]	\$ 625	[2089]	VRGP	
<input type="checkbox"/>	<input type="checkbox"/>	Recyclable Materials (GP Apndx F)	\$ 500.00	[2042]	\$ 250	[2090]	VRGP	
<input type="checkbox"/>	<input type="checkbox"/>	Universal Wastes/Compatible Solid Wastes (GP Apndx G)	\$1,250.00	[2043]	\$ 625	[2091]	VRGP	
<b>Totals (Sum of all fees for Facility Categories selected) ►</b>								

## Part I: Registration Type and Fee Information (continued)

Check the appropriate box(es) further specifying the registration type.

2.  Replacement of an existing license or individual permit
3.  A request for an additional Solid Waste Facility Category(ies) (select "New" registration type)
4.  \*Modification of an existing Registration for a Solid Waste Facility Category (must only be the following types of proposed modifications):
  - Addition of equipment for currently authorized processing activities; and/or
  - Reconfiguration of the facility layout resulting from relocation of authorized activities
5.  New owner or operator (See instructions for your options)
6.  If the Universal Waste and Compatible Solid Waste facility category is selected, check this box if disassembly of used electronics will occur at this facility.

If selecting items 2 through 4 and/or 6, provide the following:

Provide existing license or individual permit number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Note: Within sixty (60) days after the issuance of an acknowledgment or approval of registration, registrants for certain solid waste facilities categories are required to provide appropriate financial assurance mechanisms as described in the [instructions](#).

7. Town where site is located: \_\_\_\_\_

8. Brief Description of Project: \_\_\_\_\_

## Part II: 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 the State. If applicable, registrant's 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 database ([CONCORD](#)).*
- *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 860-424-3003. For any other changes contact the specific program from which you were issued 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 official correspondence from DEEP, at this electronic address, concerning the subject registration. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify DEEP if your e-mail address changes.

## Part II: Registrant Information (continued)

a) Registrant Type (check one):

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

individual     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) Secretary of the State business ID #: \_\_\_\_\_

This information can be accessed at *the Secretary of the State's database* ([CONCORD](#)).

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

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

site owner     option holder     lessee     easement holder     operator

other (specify): \_\_\_\_\_

**2. Billing contact, if different than the registrant.**

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.:

E-mail:

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

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.:

\*E-mail:

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

**Part II: Registrant Information (continued)**

**4. Attorney or other representative, if applicable:**

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Attorney:

Phone:

ext.:

E-mail:

**5. Facility Operator, if different than the registrant:**

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.:

E-mail:

**6. Facility Owner, if different than the registrant:**

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.:

E-mail:

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

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.:

E-mail:

Service Provided:

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

**8. If a pre-application meeting was held concerning the subject activity, provide the following:**

DEEP Staff Name: \_\_\_\_\_

Pre-Application Meeting Date: \_\_\_\_\_

### Part III: Site Information

#### 1. SITE NAME AND LOCATION

Name of Site:

Street Address or Location Description:

City/Town:

State:

Zip Code:

Tax Assessor's Reference: Map

Block

Lot

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

Method of determination (check one):

GPS       USGS Map       Other (please specify): \_\_\_\_\_

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

2. **TRIBAL LANDS:** Will the activity which is the subject of this registration be located on federally recognized tribal lands?       Yes       No

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

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

Information on the coastal boundary is available at [www.cteco.uconn.edu/map\\_catalog.asp](http://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](mailto:deep.store@ct.gov)).

4. **NATURAL DIVERSITY DATA BASE (NDDB) - ENDANGERED OR THREATENED SPECIES:**

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?

Yes       No      Date of Map:

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 the applicant to produce additional documentation, such as ecological surveys, which must be completed prior to submitting this permit application. A copy of the NDDB Determination response letter that has not expired **must** be submitted with this completed application as Attachment D. 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 the DEEP website at [Endangered-Species-ReviewData-Requests](#) or contact the NDDB at [deep.nddbrequest@ct.gov](mailto:deep.nddbrequest@ct.gov).

### Part III: Site Information (continued)

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 [local aquifer protection agent](#) or DEEP to take appropriate actions.

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](mailto:DEEP.AquiferProtection@ct.gov).

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

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

#### 7. ENVIRONMENTAL JUSTICE COMMUNITIES:

a. Will the activity which is the subject of this registration be conducted at a **new** facility or be a **new** activity located within an environmental justice community as defined in the [instructions](#) (DEEP-MM-INST-001)?  Yes  No

If yes, an informal public meeting must be held concerning the subject activity prior to issuance of your Registration. Refer to the [instructions](#) (DEEP- MM-INST-001) for more detail.

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

If Yes, the registrant shall submit an Environmental Justice Public Participation Plan **PRIOR TO FILING THIS REGISTRATION WITH THE DEPARTMENT** and adhere to the requirements of CGS section 22a-20a. Refer to the [Environmental Justice Public Participation Guidelines](#) (DEEP-EJ-GUID-001) for more information ([Environmental Justice \(ct.gov\)](#)).

If Yes, a copy of the Written Environmental Justice Public Participation Plan Approval Letter **must** be submitted with this completed registration as Attachment F.

#### 8. POTENTIAL ADVERSE ENVIRONMENTAL IMPACTS:

Provide a brief description of all potential adverse environmental impacts associated with the proposed regulated activities at the facility. Also describe any methods to be implanted by the Registrant to minimize such adverse impacts.

## Part IV: Supporting Documents

Check the applicable box below for each Attachment being submitted with this registration form. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be sure to include the registrant's name as indicated on this registration form.

Registrants holding an Approval of Registration under the General Permit to Construct and Operate Certain Recycling Facilities may elect to incorporate by reference, into this registration, the previously submitted and approved P.E. certified Site Plan. Only when there has been **no** change in the authorized activities or documents as previously approved by DEEP can the P.E. certified Site Plan previously submitted and approved be incorporated by reference. If the Site Plan is incorporated by reference then it does not need to be resubmitted.

- Attachment A: Site Plan:
  - Incorporated by reference:  
Previous Approval of Registration date, if applicable: \_\_\_\_\_
- Attachment B: An 8 1/2" X 11" copy of the relevant portion or a full-sized original of a USGS Quadrangle Map indicating the exact location of the facility or site and *Latitude and Longitude* (DEEP-APP-003). Indicate the quadrangle name on the map.
- Attachment C: [Coastal Consistency Review Form](#) (DEEP-APP-004), if applicable.
- Attachment D: Conservation or Preservation Restriction Information, if applicable
- Attachment E: 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 *not* 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 F: Copy of the Written Environmental Justice Public Participation Plan Approval Letter, if applicable.
- Attachment G: Professional Engineer Certification, if applicable. The PE certification statement must be included with the submission of a New registration for activities not previously authorized and for the addition of a new Solid Waste Facility Category at an existing facility.
- Attachment H: Closure plan and cost estimate for disassemblers of used electronics.

**Note: All Registrants, with the exception of Tier II registrants, shall receive an Approval of Registration and no regulated activities shall be conducted without such an Approval of Registration.** Tier II registrants for Clean Wood and/or Construction and Demolition Waste shall submit a Registration for such operations and may conduct regulated activities upon the submission of the registration. Tier II registrants shall also receive an acknowledgement of registration from the Department.

## Part V: Registrant Certification

The registrant *and* the individual(s) responsible for actually preparing the registration must sign this part. A registration will be considered incomplete unless all required live signatures are provided. Submittals of copied signatures are not acceptable. A registration will be considered insufficient unless *all* required live signatures are provided **and are the proper signatory authority as specified under Part V in the instructions**. If the registrant is the preparer, please mark N/A in the spaces provided for the preparer.

<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. I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text. 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 I have read the General Permit to Construct and Operate a Commercial Facility for the Management of Recyclable Materials and Certain Solid Wastes issued by the Commissioner of Energy and Environmental Protection; and that the management of Recyclables and other Solid wastes at the Commercial Facility which is the subject of this registration is eligible for authorization under such General Permit; that if such management of Recyclables and other Solid wastes at the Commercial Facility commenced prior to the issuance of such permit, all applicable requirements of such permit are being met; and that a functioning and effective system is in place to assure that all such requirements are met so long as the management of Recyclables and other Solid wastes at the Commercial Facility which is the subject of this registration continues.”</p> <p><i>If incorporating the Site Plan by reference:</i>          “I have examined the site plan, which was previously submitted for a registration to the Department of Energy and Environmental Protection for the activity(ies) which are the subject of this registration, and certify that to the best of my knowledge and belief, such document accurately represents the facility and its operations as of the date of this registration. I further certify that I will submit such document to the Department of Energy and Environmental Protection upon request.”</p> <p>“I understand that the subject activity is authorized only on or after the date the commissioner issues a written approval of registration with respect to such activity, except Tier II registrants. Tier II registrants are authorized to begin operations upon submittal of a complete registration form including the applicable fee.”</p>	
<hr/> Signature of Registrant	<hr/> Date
<hr/> Printed Name of Registrant	<hr/> Title (if applicable)
<hr/> Signature of Preparer (if different than above)	<hr/> Date
<hr/> Printed Name of Preparer	<hr/> 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 registration (i.e., professional engineers, surveyors, soil scientists, consultants, etc.)	

Note: Please submit this completed Registration Form, Fee, and all Supporting Documents (include one **copy** of the original registration package) to:

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

The registrant must also supply a copy of the registration form and supporting documents to the Chief Elected Official (e.g., Mayor, First Selectman, Town Manager) of the municipality where the proposed activity is to be located.

**In addition, please submit an electronic copy of the registration package directly to the program at [DEEP.Solid&HazWasteReports@ct.gov](mailto:DEEP.Solid&HazWasteReports@ct.gov).**