

# ATTACHMENT 1



# General Permit Registration Form for the Discharge of Stormwater and Dewatering Wastewaters from Construction Activities

DEPARTMENT OF ENVIRONMENTAL PROTECTION  
CENTRAL PERMIT PROCESSING UNIT  
JUL 19 2012

Please complete this form in accordance with the general permit (DEP-PED-GP-015) in order to ensure the proper handling of your registration. Print or type unless otherwise noted. You must submit the *Permit Application Transmittal Form* (DEP-APP-001) and the registration fee along with this form.

DEP USE ONLY RECEIVED BY

Application No. \_\_\_\_\_  
Permit No. \_\_\_\_\_  
Facility I.D. \_\_\_\_\_

## Part I: Registration Type

Enter a check mark in the appropriate box identifying the registration type.

<p>This registration is for (check one):</p> <p><input checked="" type="checkbox"/> A new general permit registration</p> <p><input type="checkbox"/> A modification of an existing general permit</p>	<p>Please identify any existing permit number in the space provided:</p> <p>Existing permit number: <u>APP # 201205046</u></p> <p><u>DOC # 63745</u></p> <p>GSN <u>CHECK # 1198 - \$625</u> ω</p>
--	---

## Part II: Fee Information

<p><input checked="" type="checkbox"/> <b>Registration only</b></p> <p><input type="checkbox"/> <b>Registration and Plan Review</b></p>	<p>A registration fee of \$625.00 is to be submitted with <i>each</i> registration that you are submitting at least 30 days before the initiation of construction activities.</p> <p>All construction projects that result in the disturbance of ten or more acres require the submittal of a Stormwater Pollution Control Plan and a \$625.00 plan review fee. The plan and the fee must be submitted 30 days prior to initiation of the construction activity.</p> <p>\$625.00 registration fee + \$625.00 review fee = \$1,250.00 total fee</p> <p>For municipalities, a 50% discount applies. The registration will not be processed without the fee. The fee shall be non-refundable and shall be paid by certified check or money order payable to the Department of Environmental Protection.</p>
---	--

## Part III: Registrant Information

<p>1. Fill in the name of the registrant(s) as indicated on the <i>Permit Application Transmittal Form</i> (DEP-APP-001):</p> <p>Registrant: <b>North Atlantic Towers</b></p> <p>Phone: <b>941-757-5010</b> ext. _____ Fax: _____</p> <p><input type="checkbox"/> Check here if there are co-registrants. If so, label and attach additional sheet(s) with the required information as supplied above.</p>
--

**Part III: Registrant Information (cont.)**

2. List primary contact for departmental correspondence and inquiries, if different than the registrant.

Name: **North Atlantic Towers**

Mailing Address: **1001 3<sup>rd</sup> Ave West, Suite 420**

City/Town: **Bradenton**

State: **FL**

Zip Code: **34205**

Business Phone: **941-757-5010**

ext. **110**

Fax:

Site Phone:

Emergency Phone:

Contact Person: **Dan Shriver**

Title: **Site Development Manager**

Association (e.g. developer, general or site contractor, etc.):

3. List owner of the property on which the activity will take place, if different from registrant:

Name: **Frank E. Gustofson Est. / Frank E. Jr Gustofson**

Mailing Address: **936 Linkfield Road**

City/Town: **Watertown**

State: **CT**

Zip Code: **06795**

Business Phone: **860-274-5002**

ext.

Fax:

Contact Person:

Title:

4. List developer, if different from registrant or primary contact:

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Contact Person:

Title:

5. Name and address of general contractor:

Name: **To Be Determined**

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Site Phone:

Off-hours Phone:

Contact Person:

Title:

6. List any engineer(s) or other consultant(s) employed or retained to assist in preparing the registration and Stormwater Pollution Plan.

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

Name: **Berkshire Geo-Technologies**

Mailing Address: **PO Box 61**

City/Town: **Monterey**

State: **MA**

Zip Code: **01245**

Business Phone: **413-429-4888**

ext.

Fax: **413-528-9092**

Contact Person: **Christopher Tryon**

Title: **Owner**

Service Provided: **Stormwater Pollution Control Plan**

**Part IV: Site Information**

1. Site or Project Name (if any): **Watertown (CT 1140)**  
Street Address or Description of Location: **655 Bassett Road**

City/Town: **Watertown** State: **CT** Zip Code: **06795**

2. Brief description of construction activity: **Construction of a public utility/ personal wireless service facility.**

3. Start Date: **August 15, 2012** Anticipated Completion Date: **October 15, 2012**

4. Estimated total number of acres to be disturbed: **1.53 Acres**

**Part V: Stormwater Discharge Information**

1. Where does stormwater discharge to:  
 Municipal Separate Storm System?  Yes  No (Name):  
 Surface water body or wetlands?  Yes  No (Name):

2. Is the discharge located less than 500 feet from a tidal wetland, which is not a fresh-tidal wetland?  
 Yes  No

3. Name of the watershed where the site is located OR nearest waterbody to which it discharges:  
**Fenn Brook / Wigwam Reservoir**

4. Is construction in accordance with the Guidelines established under Section 22a-329 of the Soil Erosion and Sedimentation Act?  Yes  No

5. Is construction in accordance with local soil erosion and sediment ordinances?  Yes  No  
Note: A copy of this registration and the Stormwater Pollution Control Plan must be available to the town wetlands enforcement officials, wetlands commission, or their equivalent.

6. Will the construction project disturb over ten acres?  Yes  No  
If yes, enclose a copy of the Stormwater Pollution Control Plan and plan review fee.

7. Has the construction project been reviewed for compliance with the following DEP programs?  
a. Coastal Management Act (Section 22a-92 of the Connecticut General Statutes)  Yes  No  
b. Endangered and Threatened Species (Section 26-306 of the Connecticut General Statutes)  
 Yes  No  
c. State and Federal Historic Preservation statutes?  Yes  No

### Part VI: Supporting Documents


Check the box by the attachments being submitted as verification that *all* applicable attachments have been 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 the *Permit Application Transmittal Form*.

<input checked="" type="checkbox"/>	Attachment A:	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. Indicate the quadrangle name on the map. (To obtain a copy of the relevant USGS Quadrangle Map, call your town hall or DEP Maps and Publications Sales at 860-424-3555.)
<input type="checkbox"/>	Attachment B:	A copy of the Stormwater Pollution Control Plan and plan review fee of \$625.00, if the construction project disturbs over 10 acres

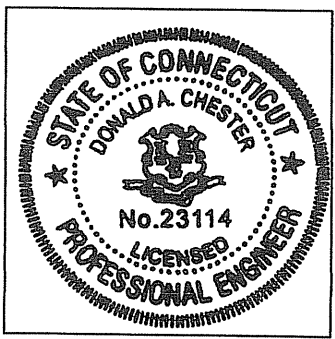
### Part VII: Environmental Professional Certification

The following certification must be signed by a professional engineer, licensed to practice in Connecticut.

"I certify that I have thoroughly and completely reviewed the Stormwater Pollution Control Plan for the site. I further certify, based on such review and in my professional judgment, that the Stormwater Pollution Control Plan has been prepared in accordance with the Connecticut Guidelines for Soil Erosion and Sediment Control, as amended, and the conditions for the General Permit for the Discharge of Stormwater and Dewatering Wastewaters from Construction Activities and the controls required for such Plan are appropriate for the site. I am aware that there are significant penalties for false statements in this certification, including the possibility of fine and imprisonment for knowingly making false statements."

 _____ Signature of Professional Engineer	<u>7/15/2012</u> _____ Date
<u>DONALD A. CHESTER</u> _____ Name of Professional Engineer (print or type)	<u>CT. 23114</u> _____ P. E. Number (if applicable)

Affix P. E. Stamp Here

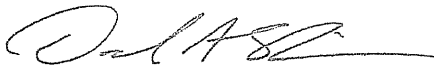


**Part VIII: Registrant Certification**

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 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 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 made in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the Connecticut General Statutes, pursuant to section 53a-157b of the Connecticut General Statutes, and in accordance with any other applicable statute.

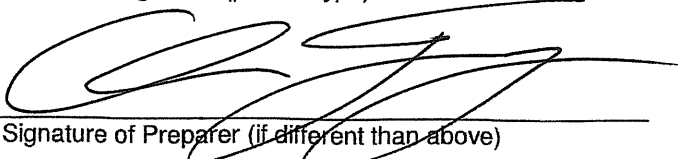
I also certify under penalty of law that I have read and understand all conditions of the General Permit for the Discharge of Stormwater and Dewatering Wastewaters from Construction Activities, that all conditions for eligibility for authorization under the general permit are met, all terms and conditions of the general permit are being met for all discharges which have been initiated and are the subject of this registration, and that a system is in place to ensure that all terms and conditions of this general permit will continue to be met for all discharges authorized by this general permit at the site. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowingly making false statements."

  
 Signature of Registrant Date 7/2/12

---

DAVID A SHRYVER  
 Name of Registrant (print or type) Title (if applicable) SITE DEVELOPMENT MGR.

---

  
 Signature of Preparer (if different than above) Date 7/15/12

---

Chris Tryon  
 Name of Preparer (print or type) Title (if applicable) Owner

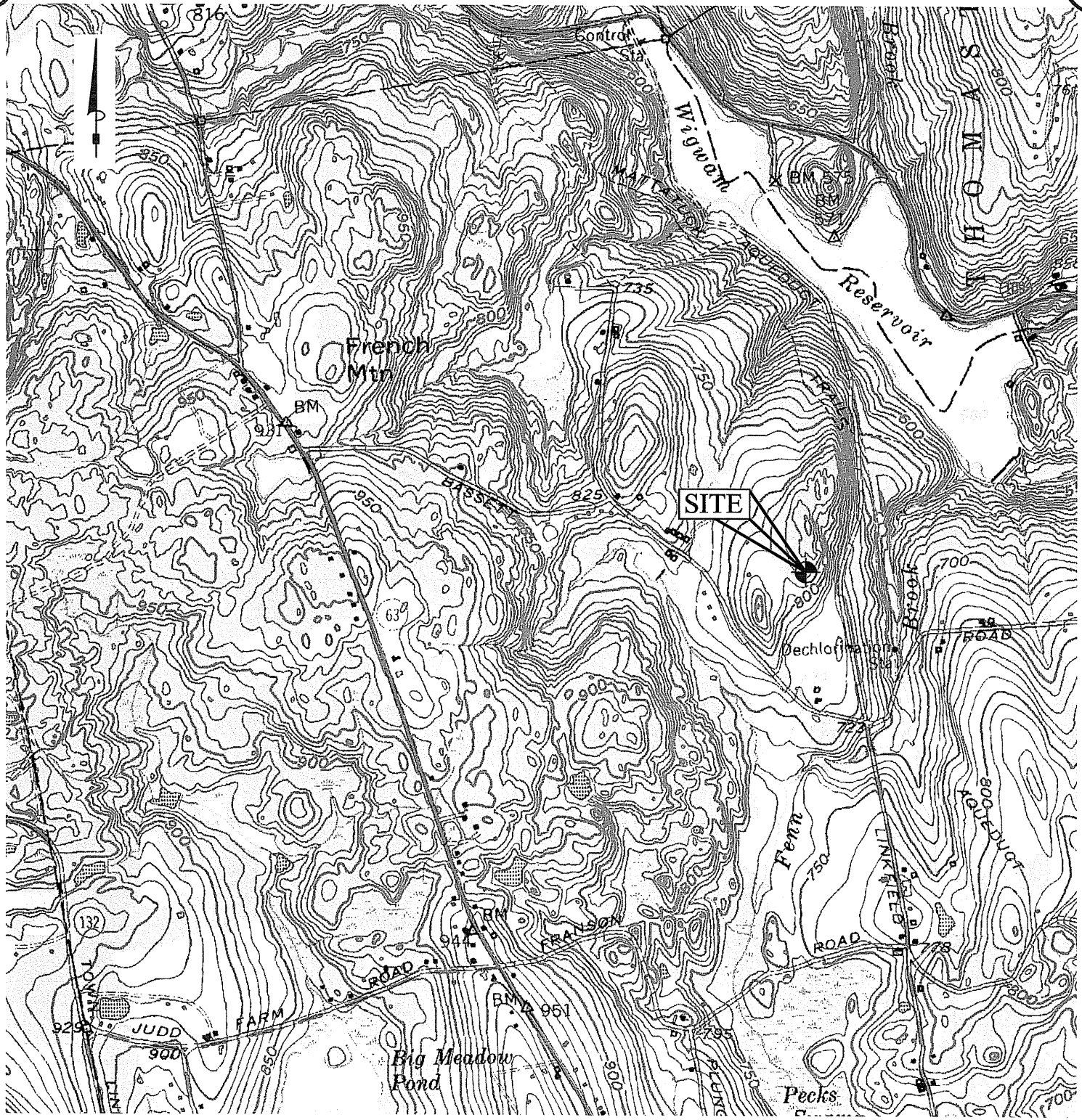
Check here if additional signatures are necessary.  
 If so, please reproduce this sheet and attach signed copies to this sheet.

Note: Please submit the *Permit Application Transmittal Form*, the Registration Form, Fee(s), and all Supporting Documents to:

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

Note: If discharging to municipal separate storm sewer, send a copy of this completed registration form to the owner or operator of that system.

If discharging to a public drinking water supply watershed or aquifer area, send a copy of this completed registration form to the appropriate water company.



# USGS TOPOGRAPHIC MAP

PREPARED FOR

## NORTH ATLANTIC TOWERS

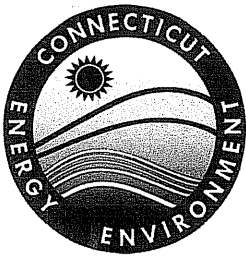
655 BASSETT ROAD, WATERTOWN, CT



DESIGNED BY:	CJT
CHECKED BY:	DC
APPROVED BY:	CJT
DATE:	07/16/12
SCALE:	1"=1,500'

FIGURE

# A-1



Connecticut Department of Energy & Environmental Protection

DEPARTMENT OF ENVIRONMENTAL PROTECTION  
CENTRAL PERMIT PROCESSING UNIT  
JUL 19 2012  
RECEIVED

CPPU USE ONLY	
App #:	201205646
Doc #:	63745
Check #:	1198-15625. w

# Permit Application Transmittal Form

Please complete this transmittal form in accordance with the instructions in order to ensure the proper handling of your application(s) and the associated fee(s). Print legibly or type.

## Part I: 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, applicant's name shall be stated **exactly** as it is registered with the Secretary of State.
- 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.).

Applicant: **North Atlantic Towers**  
Mailing Address: **1001 3<sup>rd</sup> Ave West, Suite 420**  
City/Town: **Bradenton** State: **FL** Zip Code: **34205**  
Business Phone: **941-757-5010** ext.: Fax:  
Contact Person: **Dan Shriver** Phone: **941-757-5010** ext. **110**  
E-Mail:

Applicant (check one):  individual  \*business entity  federal agency  state agency  municipality  tribal  
\*If a business entity, list type (e.g., corporation, limited partnership, etc.):  
 Check if any co-applicants. If so, attach additional sheet(s) with the required information as supplied above.

Please provide the following information to be used for *billing purposes only*, if different:  
Company/Individual Name:  
Mailing Address:  
City/Town: State: Zip Code:  
Contact Person: Phone: ext.

## Part II: Project Information

Brief Description of Project: (Example: Development of a 50 slip marina on Long Island Sound)  
**Construction of a public utility/ personal wireless service facility consisting of a monopole tower, one equipment shelter, and a utility backboard within a fenced compound.**  
Location (City/Town): **Watertown**

Other Project Related Permits (not included with this form):

Permit Description	Issuing Authority	Submittal Date	Issuance Date	Denial Date	Permit #



Transmittal ID: 63745

Date Created: 7/19/2012

App No: 201205646

Program: STORM - Stormwater Permits

App Type: New

Env. Int. Type Desc: Stormwater and Dewatering Wastewaters from Construction Activities-GP  
5-10 Acres

Created By: Cruz Belinda

Receivable Amount: \$625.00 ✓

Receipt Amount: \$625.00 ✓

App Received Date: 7/19/2012

Application Desc: Cobnstruction of a public utility/ personal wireless service facility consisting of a monopole tower, one equipment shelter, and utility backboard within a fenced compound. Watertown, CT.

---

<u>Affiliation Type</u>	<u>Client ID</u>	<u>Client</u>	<u>Receipt No.</u>	<u>Pmt Amount</u>	<u>Address</u>	<u>Contact</u>
Registrant	1028426	North Atlantic Towers ,	164744	\$625.00	1001 3rd Ave W Suite 420 Bradenton FL 34205	Dan Shriver (941)757-5010

---

K. Allen