

Pre-Application Questionnaire

In order to ensure we have an effective pre-application meeting, **please review every question and respond where applicable**. Your answers will help us identify which program staff should attend the meeting.

Send completed form with a site plan or analytical results if applicable, to the Office of Planning and Program Development (OPPD): DEEP.OPPD@ct.gov. For questions, contact the OPPD at DEEP.OPPD@ct.gov.

Please refer to the <u>Pre-Application Guidance</u> to better prepare for the pre-application meeting.

Please note: All records, paper or electronic, submitted to the Department of Energy and Environmental Protection are subject to disclosure under the Freedom of Information Act (FOIA) unless the records or portions thereof are exempt from disclosure pursuant to section 1-210 of the Connecticut General Statutes. Individuals or entities submitting records with this questionnaire must evaluate those records for any sensitive information prior to their submission and alert the Department if a redacted version has been submitted. The Department is obligated to comply fully with all requirements for the disclosure of records under FOIA.

Part I: Contact Information

| 1. | roposed Applicant Name: | | | | | |
|----|---|----------------------------------|--|--|--|--|
| | Applicant Contact Person: | | | | | |
| | Phone: | Email: | | | | |
| 2. | Pre-Application Meeting Contact Person: | | | | | |
| | Phone: | Email: | | | | |
| | Affiliation: | | | | | |
| 3. | Applicant Type (check one): | | | | | |
| | ☐ individual ☐ federal agency [| state agency municipality tribal | | | | |
| | ☐ business entity | | | | | |
| 4. | Applicant's relationship to the property at which the proposed activity is to be located (select all that apply): | | | | | |
| | site owner option holder | lessee | | | | |
| | asement holder operator | other (specify): | | | | |
| 5. | Please suggest dates and times your team is available to meet, beginning 2 weeks from the date of | | | | | |
| | , 3 3 | | | | | |
| | submittal of this form: | | | | | |
| | | | | | | |

Part II: Project Information

| 1. | Project Address (if known): City/Town: | | | | |
|----|--|--|--|--|--|
| 2. | What are the projected time frames for construction and operation of this project, including any estimated schedule of activities? | | | | |
| 3. | Do you plan to apply for any public funding? If yes, check type: | | | | |
| 4. | Project Type: (check all that apply Existing Business New Business New Construction Other (please specify): | ☐ Residential☐ Commercial/Industrial☐ Mixed Use | ☐ Municipal ☐ State ☐ Federal | | |
| 5. | Type of Proposed Activity: (check Solar energy Wind energy Energy storage Other (please specify): | all that apply): Brownfield redevelopment Waste organics/composting Manufacturing | ☐ Distribution/warehouse ☐ Pharmaceuticals | | |
| 6. | Project Description: | | | | |
| 7. | Description of the site as it currently exists and what changes would occur as a result of the project. | | | | |
| 8. | Extent of land area proposed to be disturbed (in acres): | | | | |

Part III: Project Requirements

| Check all requirements listed below that may be applicable to your project: | | | | | | |
|---|--|---------------------------|---------------|---|--|--|
| | | | | | | |
| | If yes, does your project account for <u>sea level rise</u> ? ☐ Yes ☐ No | | | | | |
| If yes, please specify: | | | | | | |
| Project located within a <u>flood hazard area</u> ? | | | | | | |
| | Project located in an <u>aquifer protection area</u> | | | | | |
| | Project located in a CT DEEP Natural Diversity Database state listed species habitat | | | | | |
| | Project located in an Environ | | <u>unity</u> | | | |
| | Environmental remediation is | needed at the site | | | | |
| | Property subject to the Prope | - | | | | |
| | Project located on a brownfie | <u>lld</u> | | | | |
| | Project requires hazardous n | naterials management | (e.g., remo | oval of asbestos, PCB or lead) | | |
| | Project located on state prop | - | | | | |
| | Project requires Connecticut | | ` | , | | |
| | Project requires submittal to | the Connecticut Siting | Council? [| Date submitted: | | |
| | Please name any other agencies you already are, or anticipate needing coordination with (for example: DOT, <u>DPH, DECD, BETP, PURA, DoAg, USACOE, USEPA, municipal authorities):</u> | | | | | |
| DAM SAF | ETY, WETLANDS, OR COAS | STAL | | | | |
| | Construction of a pond or sur retention/detention | face water impoundm | ent, includii | ng those used for sedimentation, stormwater | | |
| | If yes, will it be (check one): | ☐ temporary | or 🗌 | permanent | | |
| | Constructing, altering, rebuild | ling, or substantially re | pairing any | y dam, dike, or-similar structure | | |
| | | | | | | |
| | If yes, are there any residential areas downgradient? | | | | | |
| | | | | | | |
| | If yes, what is the extent of the area to be altered (in acres)? | | | | | |
| | If yes, will there be ☐ fill, [| ☐ dredging and/or ☐ | excavatio | on? | | |
| | Installing a structure within a | tidal or inland wetland | or waterco | ourse | | |
| | Nearby wetlands | | | | | |
| | If yes, what is the approximate buffer between the project footprint and wetlands delineation? | | | | | |
| | | | | | | |
| AIR | | | | | | |
| | Individual piece of equipment or a process which has the <i>potential to emit</i> 15 tons or more per year of any individual air pollutant or meet any other applicability requirement of RCSA Section 22a-174-3a(a) | | | | | |
| | If yes, provide the total proposed annual emissions for the project (tpy): | | | | | |
| | PM ₁₀ /PM _{2.5} : | VOC: | CO: | | | |
| | SOx: | NOx: | HAPs: | | | |
| ENERGY | | | | | | |
| | | | | | | |
| | | | | | | |
| | If yes, do you have an interconnection location identified? Yes No | | | | | |
| | If yes, how many megawatts are you expecting to generate or store? | | | | | |

Part III: Project Requirements (continued)

| WAS | STE AND M | ATERIALS MANAGEMEN | т | | | | | |
|-------------|--|---|---|---|--|--|--|--|
| | ☐ Management of wastes either generated ☐ on-site or ☐ off-site If yes, what types of wastes will be managed? (Check all that apply) | | | | | | | |
| | | Biomedical Wastes [| ☐ Hazardous Wa☐ Radioactive Wa | · | ecyclable Wastes onnecticut Regulated/\$ | Special Wastes | | |
| | ☐ Other (please specify): ☐ Storage of any liquids or gaseous fuels or chemicals at the site If yes, describe substance and proposed storage (include above ground, underground, tank size, vapor pressure, etc.): | | | | | | | |
| | ☐ Use or storage of pesticides ☐ Manufacturing, possession, use, or disposal of any radioactive materials (e.g., x-ray and materials testing equipment, etc.) | | | | | | | |
| WAT | ATER DISCHARGE Discharges of wastewater (other than domestic sewage), including but not limited to, contact and non-contact cooling water, blowdown from heating and cooling equipment, process wastewaters, rinsewaters, floor drainage, or other wastewaters If yes, identify below, listing projected daily volume in gallons per day (gpd) and proposed discharge location (i.e., surface water, sanitary sewer, groundwater). | | | | | | | |
| | Wastewa | ater Type | | Volume (gpd) | d) Discharge Location | | | |
| | I IAIII — Ai — — | of a comita muse and a community of the company of | al austana 16 vaa | | duma (mad) | | | |
| | Utilization of a sanitary sewage disposal s | | Volume (gpd) | Method | | Volume (gpd) | | |
| | | urface sewage treatment disposal system | | ☐ Privately owned | treatment works | | | |
| | ☐ Publi | cly owned treatment works | | ☐ Other (please sp | | | | |
| WAT | VATER DIVERSION (select all that apply) | | | | | | | |
| r S t | Withdrawal of groundwater from one or more wells joined in one system whose combined maximum withdrawal exceeds 50,000 gallons of water during any twenty-four hour period If yes, provide: quantity of water diverted (million gallons per day): the location of well(s) (lat/long): | | excess of any twent If yes, pro water dive per day): | al of surface waters in 50,000 gallons during y-four hour period wide: quantity of erted (million gallons on of withdrawals | supply distributi service area to distribution syst area, or installa to transfer such | in any twenty- I from one water on system or another such em or service tion of capacity water quantity of water | | |