



**Connecticut**  
**Department of Energy &**  
**Environmental Protection**

Bureau of Materials Management and Compliance Assurance  
 Waste Engineering and Enforcement Division

**General Permit Registration Form**  
**for a Municipal Transfer Station**

Please complete this form in accordance with the "[Instructions](#)" (DEEP-SW-INST-002) 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.

Your submittal to DEEP must include:

- (1) this completed registration form, DEEP-SW-REG-002;
- (2) Site plan and any required supporting documents; and
- (3) Fee.

CPPU USE ONLY
App #: _____
Doc #: _____
Check #: _____
<b>Program: Transfer Station General Permit</b>

**Part I: Registration Type**

<p>Check one of the following:</p> <p><input type="checkbox"/> New facility</p> <p><input type="checkbox"/> Facility currently operating under a DEEP individual solid waste permit or a recycling general permit</p> <p><input type="checkbox"/> Renewal of an existing registration under the General Permit for a Municipal Transfer Station</p>	<p>Identify any permit or registration approval already issued for the facility:</p>  <p>Date granted:</p>
<p><b>Town where site is located:</b> _____</p> <p><b>Brief Description of Project:</b></p>	

**Part II: Fee Information**

Each municipal transfer station requires a separate registration. The registration fee for a municipal transfer station is \$8000.00 [§963]. An initial fee of \$800.00 shall be submitted with the registration package and the balance of the fee will be billed to the municipality annually in equal installments (\$800.00/year). The \$800.00 annual invoice is due on or before July 1 of each year. The registration will not be processed without the initial fee. The fee is non-refundable and shall be paid by check or money order to: Department of Energy and Environmental Protection or by such other method as the commissioner may allow.

### Part III: 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 State. If applicable, registrant'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 [onlineBusinessSearch \(ct.gov\)](http://onlineBusinessSearch.ct.gov)
- 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 [DEEP.OPPD@ct.gov](mailto:DEEP.OPPD@ct.gov). For any other changes you must contact the specific program from which you hold a current DEEP license.

<p><b>1. Registrant Name:</b></p> <p>Mailing Address:</p> <p>City/Town: _____ State: _____ Zip Code: _____</p> <p>Business Phone: _____ ext.: _____</p> <p>Contact Person: _____ Phone: _____ ext. _____</p> <p>*E-mail: _____</p> <p>*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.</p> <p>a) Registrant Type (check one):</p> <p><input type="checkbox"/> individual      <input type="checkbox"/> federal agency      <input type="checkbox"/> state agency      <input type="checkbox"/> municipality      <input type="checkbox"/> tribal</p> <p><input type="checkbox"/> *business entity (*If a business entity complete i through iii):</p> <p>i) check type: <input type="checkbox"/> corporation      <input type="checkbox"/> limited liability company      <input type="checkbox"/> limited partnership</p> <p><input type="checkbox"/> limited liability partnership      <input type="checkbox"/> statutory trust      <input type="checkbox"/> Other: _____</p> <p>ii) provide Secretary of the State business ID #: _____ This information can be accessed at the Secretary of State's database <a href="http://onlineBusinessSearch.ct.gov">onlineBusinessSearch (ct.gov)</a>.</p> <p>iii) <input type="checkbox"/> Check here if your business is <b>NOT</b> registered with the Secretary of State's office.</p> <p><input type="checkbox"/> Check here if any co-registrants. If so, attach additional sheet(s) with the required information as requested above.</p> <p>b) Registrant's interest in property at which the proposed activity is to be located:</p> <p><input type="checkbox"/> site owner      <input type="checkbox"/> option holder      <input type="checkbox"/> lessee      <input type="checkbox"/> easement holder      <input type="checkbox"/> operator</p> <p><input type="checkbox"/> other (specify): _____</p>
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**Part III: Registrant Information (continued)**

**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 at *municipality* for correspondence and inquiries:**

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

\*E-mail:

**4. Primary contact if not municipal contact named in (3) above (e.g., environmental consultant, engineer, etc.):**

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

\*E-mail:

**5. Owner of the property on which facility will be located:**

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

\*E-mail:

**6. Engineer(s) or other consultant(s) employed or retained to assist in preparing this submittal:**

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

\*E-mail:

Service Provided:

\*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 III: Registrant Information (continued)

#### 7. Facility Operator if not the Municipality:

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.:

Contact Person:

Phone:

ext.

\*E-mail:

Name of Facility Foreman/Lead (on Site):

On-site Phone:

\*By providing this email 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 emails from "ct.gov" addresses. Also, please notify DEEP if your e-mail address changes.

### Part IV: Pre-Application Meeting

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

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

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

### Part V: Site Information

#### 1. FACILITY NAME AND LOCATION

Name of facility:

Street Address or Location Description:

City/Town:

State:

Zip Code:

2. **TRIBAL LANDS:** Is or will the facility which is the subject of this registration be located on federally recognized Indian lands?  Yes  No

3. **COASTAL BOUNDARY:** Is the activity which is the subject of this registration 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, you must submit a [Coastal Consistency Review Form](#) (DEP-APP-004) with your 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)).

If no, is the activity which is the subject of this registration located within the coastal area? (see town list in the instructions)  Yes  No

## Part V: Site Information (continued)

### 4. NATURAL DIVERSITY DATA BASE (NDDDB) - ENDANGERED OR THREATENED SPECIES:

According to the most current "Natural Diversity Data Base Areas Maps", will the activity which is the subject of this registration, 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 NDDDB State Listed Species Review Form](#) (DEEP-APP-007) to the address specified on the form, **prior** to submitting this application. Please note NDDDB review generally takes 4 to 6 weeks and may require the registrant to produce additional documentation, such as ecological surveys, which must be completed prior to submitting this permit registration. A copy of the NDDDB Determination response letter that has not expired **must** be submitted with this completed registration as Attachment D. 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.

For more information visit the DEEP website at [Endangered-Species-ReviewData-Requests](#) or contact the NDDDB at [deep.nddbrequest@ct.gov](mailto:deep.nddbrequest@ct.gov).

### 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: Is the property 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. Does the site include a **new** facility or **new** activity located within an environmental justice community as defined in the [instructions](#) (DEEP-SW-INST-002)?     Yes     No

If yes, an informal public meeting must be held concerning the subject activity prior to issuance of your permit approval. Refer to the instructions (DEEP-SW-INST-002) for more detail.

b. Does the subject of this 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 and adhere to the requirements of section 22a-20a CGS. Refer to the Environmental Justice Public Participation Guidelines (DEEP-EJ-GUID-001) for more information ([www.ct.gov/deep/environmentaljustice](http://www.ct.gov/deep/environmentaljustice)).

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

**Part V: Site Information (continued)**

8. **FACILITY OPERATED BY CONTRACTOR:** Will an outside contractor (and not the municipality) operate the facility?       Yes       No

If Yes, prepare and include a Duties Statement as Attachment G.

9. **ADDITIONAL RECYCLABLE MATERIALS:** List all additional materials that are being collected at the facility and sent off-site for recycling (e.g. FOG) that are not otherwise authorized by the subject general permit.

## Part VI: Supporting Documents

Check the applicable box below for each attachment being submitted with this registration form.

When submitting any supporting documents:

- (1) label each document with its respective attachment letter (e.g., Attachment A, etc.);
- (2) include the registrant/applicant's name as registered with the Secretary of State

### REQUIRED:

- Attachment A: An 8 1/2" by 11" copy of the relevant portion or a full-sized original of a United States Geological Survey (USGS) quadrangle map, with a scale of 1:24,000, showing the exact location of the site and the area within a one-mile radius of the site. Identify the quadrangle name and number on such copy.
- Attachment B: Facility Site Plan that has been prepared, signed, dated, stamped and certified by a professional engineer (P.E.) licensed to practice in Connecticut
- Attachment C: [Coastal Consistency Review Form](#) (DEP-APP-004), if applicable
- Attachment D: 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 E: Conservation or Preservation Restriction Information, if applicable
- Attachment F: Copy of the Written Environmental Justice Public Participation Plan Approval Letter, if applicable
- Attachment G: Duties Statement, If Facility is (or will be) Operated by a Contractor

## Part VII: Consent to Revocation of Existing Waste Permits

Only one permit or registration may authorize the solid waste activities at the transfer station facility. In order to register for this General Permit, the permittee/registrant shall therefore consent to the revocation of any other permits or registrations issued previously to authorize the transfer station and recycling activities.

"I consent to revoking the Individual Solid Waste Permit for the subject transfer station, effective on the date the commissioner approves this registration for the General Permit for a Municipal Transfer Station."

\_\_\_\_\_  
Signature of First Selectman/Mayor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of First Selectman/Mayor (print or type)

### 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. A registration will be considered insufficient unless *all* required signatures are provided **and are the proper signatory authority as specified under Part VIII 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.</p> <p>I certify that this general permit registration is on complete and accurate forms as prescribed by the commissioner without alteration of the text.</p> <p>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>	
<hr/> Signature of Registrant	<hr/> Date
<hr/> Name of Registrant (print or type)	<hr/> Title (if applicable)
<hr/> Signature of Preparer (if different)	<hr/> Date
<hr/> Name of Preparer (print or type)	<hr/> Title (if applicable)
<input type="checkbox"/> Check here if additional signatures are required. <i>You must include signatures of any person preparing any report or parts thereof required in this submittal (i.e., professional engineers, surveyors, soil scientists, consultants, etc.) If needed, reproduce this sheet and attach signed copies to this sheet.</i>	

- Please submit:
- (1) completed *Registration Form*;
  - (2) Site Plan and all Required Supporting Documents;
  - (3) **One copy of the entire package; and**
  - (4) Fee

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