

Connecticut Department of Energy & Environmental Protection

Office of the Commissioner
Office of Planning & Program Development
Land Acquisition & Management

DEEP Land Acquisition & Management Use Only

A-File #:

Type: _____

Facility:

Date Issued:

Requestor:

Application for Review of Land Management Request on State-Owned Land or Water

Note: As of 5/2020, this application is not required when utilizing a state-owned boat launch to access a privately owned lake.

Please complete this form in accordance with the <u>instructions</u> to ensure the proper handling of your application. Print or type unless otherwise noted. DEEP encourages all applicants to submit their application electronically by email to <u>DEEP.PropertyManagement@ct.gov</u>.

Part I: Application Type

Check the appropriate box identifying the application type.

This application is for (check one):	Please identify any previous or existing authorization or A-	
☐ A <i>new</i> application	File number made by DEEP below. Copies of any prior authorizations, such as letters of permission or other	
A renewal of an existing authorization	documentation, should be provided as Attachment F.	
☐ A <i>modification</i> of an existing authorization	Existing authorization #:	
☐ A reconsideration of a previously denied	Date Issued:	
request	Date Expired:	

Part II: 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 (CONCORD)
- 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.).

1.	Applicant Name:		
	Mailing Address:		
	City/Town:	State:	Zip Code:
	Business Phone:	ext.:	
	Contact Person:	Phone:	ext.
	*E-mail:		
	address, concerning th	e subject application.	eeing to receive official correspondence from DEEP, at this electronic Please remember to check your security settings to be sure you can , please notify DEEP if your e-mail address changes.

Part II: Applicant Information (continued)

a)	Applicant Type (check one):				
	☐ individual ☐ federal agency ☐ state a	gency	municipality tribal		
	*business entity (*If a business entity complete i through	iii):			
	i) check type: Corporation Imited liability company Imited partnership				
	☐ limited liability partnership ☐ statutory trust ☐ Other:				
	ii) provide Secretary of the State business ID #:This information can be accessed at the Secretary of State's database (CONCORD).				
	iii) \square Check here if your business is NOT registered with	the Secretary of	State's office.		
	Check if any co-applicants. If so, attach additional sheet(s) above.	with the required	I information as requested		
2.	Primary contact for departmental correspondence and i	nquiries, if diff	erent than the applicant.		
	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 offic address, concerning the subject application. Please remember to receive e-mails from "ct.gov" addresses. Also, please notify DEEF	check your secur	ity settings to be sure you can		
3.	Attorney or other representative, if applicable:				
	Firm Name:				
	Mailing Address:				
	City/Town:	State:	Zip Code:		
	Business Phone:	ext.:			
	Attorney:	Phone:	ext.		
	E-mail:				
4.	Engineer(s), Land Surveyor, or other consultant(s) emp proposed project.	loyed or retaine	ed to assist with this		
	Name:				
	Mailing Address:				
	City/Town:	State:	Zip Code:		
	Business Phone:	ext.:			
	Contact Person:	Phone:	ext.		
	E-mail:				

Part III: Site Information

1.	NAME AND LOCATION OF STATE PROPERTY SUBJECT TO REQUESTED ACTIVITY				
	a.	a. Name of DEEP Property:			
		Street Address or Location Description:			
		City/Town:	State:	Zip Code:	
		Tax Assessor's Reference: Map	Block	Lot	
	b.	Latitude and longitude of the location of the proposed known: Latitude: Longitude:	activity in degrees,	minutes, and seconds, if	
	Me	thod of determination (check one):			
		GPS USGS Map Other (please	specify):		
	If a	USGS Map was used, provide the quadrangle name:			
2.		ASTAL BOUNDARY: Will the activity which is the subastal boundary as delineated on DEEP approved coasta		ion be located within the	
	the	es, and this application is for a new authorization or a n physical footprint of the subject activity is modified, sul EEP-APP-004) with this completed application as Attacl	omit a <u>Coastal Con</u>		
		Information on the coastal boundary is available at www. (Select the town and then select coastal boundary. If t will not be able to select the coastal boundary map.), or	he town is not withi	n the coastal boundary you	
3.	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			
	If YES, complete and submit a <u>Request for NDDB State Listed Species Review Form</u> (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 <i>must</i> 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.				
		more information visit the DEEP website at Endangere DB at 860-424-3011.	ed-Species-Review	Data-Requests or call the	
	whi wh	TE: All requests are subject to review by DEEP's Pich includes staff from the Wildlife Division, Fisheries Dether or not a proposed activity is located within an areang a habitat for endangered, threatened, or special con	ivision, and other D a deemed by the NI	epartmental programs,	

Part III: Site Information (continued)

(
4. CONSERVATION EASEMENT OR RESTRICTION: Will the activity which is the subject of this application be located within a conservation easement or conservation restriction area?					
☐ Yes	☐ No				
If Yes, a ful	 Loopy of such de	eeds or documents and pr	oof of written noti	ce of this app	dication to the holder
of such eas	If Yes, a full copy of such deeds or documents and proof of written notice of this application to the holder of such easement or restriction, or a letter from the holder of such easement or restriction, verifying that this application is in compliance with the terms of the restriction, must be submitted as Attachment E.				riction, verifying that
5 OTHER PE	RMITS OR APP	PROVALS: List any previo	us state federal	or local perm	uits or approvals that
		r are in the process of beir			
Type or Nature of Permit			Date Issued/Status	Expiration Date	Permittee/Applicant Name
			<u> </u>		
			<u> </u>		
	+		+		
	+		+		
Part IV: Sumi	mary of Reqเ	uested Project			
1. Type of Sta	eto Property for	Requested Activity (che	ack all that annivi		
1. 19000100	ite i roporty to.	Nequested Astivity (Silv	or all that apply).		
<u>—</u>	☐ State-owned or controlled☐ State Park, Forest, Wildlife Management, or other Conservation Area				
Name of Waterbody: Name of Park, Forest, WMA, or other:			, or other:		
☐ State-owned or controlled Boat Launch					
Name o	of Boat Launch:				
		or a list of waterbodies w	high DEED owns	owne a nort	ion or has an interest
		or a list of waterbodies water bodies water			ion, or has an interest.
11		P/Boating/Boat-Launche			cticut for a list of
		information on use restr			
2. Duration of	2. Duration of Proposed Activity				
☐ Temporary / Short-term					
☐ Permar	☐ Permanent				
3. Anticipated	J Start Date of i	Proposed Activity.			
4. Anticipated	d Date of Comp	letion:			
5. Constructi	5. Construction Methods & Materials (if applicable):				

Part IV: Summary of Requested Project (continued)

6.	Mutual Benefit	(s) Provided by Request:
7.	at which the requ	ve: Describe the existing site conditions and present and intended use(s) of the property juested activity will be conducted, the reason for conducting the proposed activity, and in as detailed in the instructions on completing this section.
Part	: V: Supportir	ng Documents
any s	supporting docum	box below for each attachment being submitted with this application form. When submitting tents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be plicant's name as indicated on this application form.
	Attachment A:	Deeds and Town Assessor's Maps
	Attachment B:	Project Plan, Site Plan, or Engineering Drawings (if applicable).
	Attachment C:	Coastal Consistency Review Form (DEEP-APP-004), if applicable.
	Attachment D:	A copy of the NDDB Determination response letter that has not expired. Include a copy of any mitigation measures developed for this activity and approved by NDDB. Do <i>not</i> submit any NDDB Preliminary Site Assessments with your application. Be aware that you must renew your NDDB Determination if it expires before project work commences.
	Attachment E:	Conservation Easement or Restriction Information, if applicable.
	Attachment F:	Other Supporting Documents as detailed in the instructions.

Part VI: Application Certification

The applicant must sign this certification. An application will be considered incomplete unless the required signature is provided *and is the proper signatory authority as specified under Part VI in the* instructions.

"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 application is on complete and accurate forms as prescribed by the commissioner without alteration of the text."		
"By entering my name below, I agree that I am providing my leg certifications above."	gal signature, and am legally bound by the	
Signature of Applicant	Date	
Name of Applicant (print or type)	Title (if applicable)	
Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet.		

Application Submission Information

Please submit an electronic copy of this completed Application Form and all Supporting Documents to: DEEP.PropertyManagement@ct.gov