



Permit Application for Construction and Operation of a Solid Waste Facility

Use the "Instructions" document (DEP-SW-INST-100) to assist you in completing this form. Print or type unless otherwise noted. Your submittal to DEP must include: *Permit Application Transmittal Form* (DEP-APP-001); Completed Application Form (this form, DEP-SW-APP-100); all required supporting documents; and Fee.

Part I: Application and Permit Type

In the table below, check only one box in the left column to identify the type of solid waste facility for which you are applying for a permit. Complete one permit application for each solid waste facility requiring a permit.

√	Solid Waste Facility Types (Check the type of permit you are applying for)	Initial Fee	DEP Use Only	
			Application No.	Permit No.
Solid Waste Disposal Area/Landfill				
<input type="checkbox"/>	Municipal Solid Waste	\$37,750.00		
<input type="checkbox"/>	Residue or other Solid Waste	\$26,500.00		
<input type="checkbox"/>	Closure Plan - Active Site	\$610.00		
<input type="checkbox"/>	Closure Plan - Inactive Site	\$4,000.00		
<input type="checkbox"/>	Closure Plan – Unpermitted Site	\$3,000.00		
Volume Reduction Plant				
<input type="checkbox"/>	Resources Recovery Facility	\$138,250.00		
<input type="checkbox"/>	Intermediate Processing Center	\$14,500.00		
<input type="checkbox"/>	Composting ≤100 Tons/day Source Separated Organic Material	\$7,750.00		
<input type="checkbox"/>	Composting >100 tons/day Source Separated Organic Material	\$10,000.00		
<input type="checkbox"/>	Construction and Demolition Waste ≤100 tons/day	\$7,750.00		
<input type="checkbox"/>	Construction and Demolition Waste >100 tons/day	\$14,500.00		
<input type="checkbox"/>	Land Clearing/Clean Wood Processing	\$10,000.00		
<input type="checkbox"/>	Sludge Processing	\$7,750.00		
<input type="checkbox"/>	Other (i.e., Shredder, Baler, Compactor, etc.) ≤100 tons/day (Please specify type)	\$10,000.00		
<input type="checkbox"/>	Other (i.e., Shredder, Baler, Compactor, etc.) >100 tons/day (Please specify type)	\$14,500.00		
<input type="checkbox"/>	Renewal - Resources Recovery Facility	\$1,400.00		
<input type="checkbox"/>	Renewal - Composting, Source Separated Organic Material	\$330.00		
<input type="checkbox"/>	Renewal - All Others	\$660.00		

Part I: Application and Permit Type (continued)

	Solid Waste Facility Types (Check the type of permit you are applying for)	Initial Fee	DEP Use Only							
			Application No.	Permit No.						
Transfer Stations										
<input type="checkbox"/>	≤75 tons/day	\$7,750.00								
<input type="checkbox"/>	>75 and ≤150 tons/day	\$10,000.00								
<input type="checkbox"/>	>150 tons/day	\$11,500.00								
<input type="checkbox"/>	Renewal	\$660.00								
Biomedical Waste Treatment Facility										
<input type="checkbox"/>	New Application	\$19,000.00								
<input type="checkbox"/>	Renewal	\$660.00								
Minor Permit Amendments										
<input type="checkbox"/>	Solid Waste Disposal Area/Landfill	\$1,375.00								
<input type="checkbox"/>	All Others (<i>Please specify type of facility</i>)	\$940.00								
Permit Modifications										
<input type="checkbox"/>	<i>Regulatory Requirement Modification</i> A modification to an existing permit to authorize a change to satisfy new statute, regulation, permit or order. <i>(Please specify type of facility)</i>	25% of the standard application fee, maximum of \$11,500.00								
<input type="checkbox"/>	<i>Permittee Initiated Modification</i> A modification to an existing permit to authorize a change in the approved or existing design, capacity, process or operation of the facility. <i>(Please specify type of facility)</i>	50% of the standard application fee, maximum of \$30,250.00								
<input type="checkbox"/>	Landfill Closure Plan Modification	\$940.00								
Existing Permit Information										
If this application is for a renewal, minor amendment or modification of an existing permit or the facility was previously licensed by a general permit or an emergency or temporary authorization, provide:										
<table border="0"> <thead> <tr> <th><i>Permit or Authorization Number(s)</i></th> <th><i>Expiration Date</i></th> <th><i>Solid Waste Facility Type</i></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>					<i>Permit or Authorization Number(s)</i>	<i>Expiration Date</i>	<i>Solid Waste Facility Type</i>			
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Part II: Fee Information

The initial fee, as indicated on pages 1 and 2 of this application, is the total permit application fee due for a new permit or for a modification of an existing permit to construct, unless otherwise specified in the general statutes or in regulations adopted pursuant thereto. The initial fee for the permit type you are applying for is to be submitted with the application. The application will not be processed without the initial fee.

The fee for municipalities is 50% of the listed rates on pages 1 and 2 of this application (see section 22a-6(b) CGS).

Part III: Applicant Information

1. **Applicant:** Complete the information on the Applicant as indicated on the *Permit Application Transmittal Form* (DEP-APP-001):

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Contact Person:

Title:

Email address:

Property Interest: Check the appropriate boxes that represents the Applicant's interest in property at which the proposed activity is to be located:

site owner

option holder

lessee

easement holder

operator

other (specify)

Check here if there are co-applicants. If so, label and attach additional sheet(s) with the required information as requested above.

2. Primary contact for this application if not contact person named in (1) above (e.g., environmental consultant, engineer, etc.):

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Contact Person:

Title:

Email address:

3. List attorney or other representative, if applicable:

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

cell:

Fax:

Attorney Name:

Email address:

Part III: Applicant Information (continued)

4. Facility or Equipment Operator, if not the applicant::

Firm Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Name of Facility Foreman or Lead (on Site):

Title:

On-Site Phone:

Operator Type (check one):

Individual

Private company

Federal

State

Municipal

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

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Contact Person:

Title:

Email address:

6. Connecticut Licensed Professional Engineer (P.E.):

The applicant must retain the services of a qualified P.E. to prepare and certify the necessary engineering drawings including the operation and management plan for the facility.

Name:

Mailing Address:

City/Town:

State:

Zip Code:

Business Phone:

ext.

Fax:

Email address:

Connecticut PE Registration Number:

7. List any 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.

Fax:

Contact Person:

Title:

Email address:

Service Provided:

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

Part IV: Site Information

1. FACILITY NAME AND LOCATION

Name of Facility(if applicable):

Street Address or Location Description:

City/Town:

State:

Zip Code:

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

Latitude:

Longitude:

Method of determination (check one): GPS USGS Map

Other (please specify):

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

2. **INDIAN LANDS:** Is or will the Facility be located on federally recognized Indian lands? Yes No

3. **COASTAL AREA:** Is the proposed activity located within the coastal boundary as delineated on DEP approved coastal boundary maps? Yes No

If yes, and this application is for a new facility or modification for an existing facility, you must submit a *Coastal Consistency Review Form* (DEP-APP-004) with your application as "Attachment D".

4. **ENDANGERED OR THREATENED SPECIES:** Is the project site located within an area identified as a habitat for endangered, threatened or special concern species as identified on the "State and Federal Listed Species and Natural Communities Map"? Yes No Date of Map:

If yes, complete and submit a *Connecticut Natural Diversity Data Base (CT NDDB) Review Request Form* (DEP-APP-007) to the address specified on the form. **Please note NDDB review generally takes 4 to 6 weeks and may require additional documentation from the applicant. DEP strongly recommends that applicants complete this process before submitting the subject application.**

When submitting this **application** form, include copies of any correspondence to and from the NDDB, including copies of the completed *CT NDDB Review Request Form*, as Attachment E.

For more information visit the DEP website at www.ct.gov/dep/endangeredspecies (Review/Data Requests) or call the NDDB at 860-424-3011.

5. **AQUIFER PROTECTION AREAS:** Is the site located within a town required to establish Aquifer Protection Areas, as defined in section 22a-354a through 354bb of the General Statutes (CGS)?

Yes No

If yes, is the site within an area identified on a Level A or Level B map? Yes No

To view the applicable list of towns and maps visit the DEP website at www.ct.gov/dep/aquiferprotection

To speak with someone about the Aquifer Protection Areas, call 860-424-3020.

6. **CONSERVATION OR PRESERVATION RESTRICTION:** Is the property subject to a conservation or preservation restriction? Yes No

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

Part IV: Site Information (continued)

7. ENVIRONMENTAL JUSTICE COMMUNITY: Does the site include an applicable facility which is located within an Environmental Justice Community, as defined in the Environmental Justice Public Participation Guidelines (Guidelines) www.ct.gov/dep/environmentaljustice? Yes No

If yes and this application is for a new or expanded permit, you must prepare an Environmental Justice Public Participation Plan (DEP-EJ-PLAN-001) in accordance with the Guidelines and submit such plan to:

Environmental Justice Program
Office of the Commissioner
Department of Environmental Protection
79 Elm Street
Hartford, CT 06106-5127

prior to submitting this application. Once you have received written approval for your Environmental Justice Public Participation Plan from the DEP, submit this completed application with a copy of the Plan approval as Attachment G.

8. WETLAND AREA: Is the site located in a wetland area? Yes No

9a. WATER CLASSIFICATION: Ground water classification of the site:

9b. SURFACE WATER BODIES: Identify surface water bodies which may be impacted: (Attach additional sheets if necessary)

Name:	Surface Water Classification:
Name:	Surface Water Classification:
Name:	Surface Water Classification:
Name:	Surface Water Classification:

Part V: Facility Information

1. **DISPOSAL AREA (Landfill):** Complete this item if this application is for the construction and operation of a proposed new landfill, or the renewal or modification of an existing landfill permit.

LANDFILL TYPE (Check one): Municipal Solid Waste Residue or other Solid Waste

a. **New Landfill**

- (i) Proposed Site Capacity (**cubic yards (cy)**):
- (ii) Estimated Operating Life (**years**):
- (iii) Acreage of Property (**acres**):
- (iv) Proposed Acreage for Waste Disposal (**acres**):

b. **Existing Landfill (Permit Modification)**

- (i) Current Permitted Site Capacity (**cy**):
- (ii) Remaining Permitted Site Capacity (**cy**):
- (iii) Proposed Increase in Site Capacity (**cy**):
- (iv) Current Operating Life: (as noted in previous permit application) (**years**):
- (v) **Remaining Operating Life (years)**:
- (vi) Proposed Increase in Operating Life (**years**):
- (vii) Acreage of Property (**acres**):
- (viii) Current Permitted Acreage Remaining for Waste Disposal (**acres**):
- (ix) Proposed Increase in Acreage for Waste Disposal (**acres**):

2. **SOLID WASTE FACILITY:** Complete this item if this application is for the construction and operation of a proposed new facility, or the renewal or modification of an existing facility permit.

a. **FACILITY TYPE** (Check one):

Volume Reduction Plant (VRP) Transfer Station Biomedical Waste Facility

If you checked (VRP) indicate which type of VRP:

- Resource Recovery Facility Intermediate Processing Center
- Composting (source separated organic material) Construction and Demolition Waste
- Land Clearing/Clean Wood Processing Sludge Processing
- Other (specify):

Note: Proposed solid waste facility's that are designed to use complicated processing equipment systems or new technologies, may be required to conduct equipment shakedown and performance testing. After the issuance of the proposed facility's Permit to Construct and the completion and approval of the facility's construction, DEP will issue a Temporary Permit to Operate (TPO) in order to complete the necessary equipment and performance testing. DEP will develop the final Permit to Operate based upon the P.E. certified test report(s).

Part V: Facility Information (continued)

2b. Complete this item if this application is for the construction and operation of a proposed new facility, or the renewal or modification of an existing facility permit.

	Proposed New Facility	Existing Facility	
		Current Permit	*Proposed Permit Modification
(i) Processing Capacity (tons per day)			
(ii) Storage Capacity (cubic yards) (cy)			
(iii) Acreage of Property (acres)			
(iv) Acreage Used by Facility (acres)			
(v) Operation (days/hours)			
(vi) Processing Equipment:: In the rows across and below, list the types, sizes, number and design parameters of principle fixed equipment and rolling stock used. (i.e., chippers, loaders, etc.)			
<input type="checkbox"/> Check here if additional sheets are necessary, and label and attach them to this sheet.			
(vii) * Proposed Permit Modification Type(s) (check all that apply): <input type="checkbox"/> Equipment <input type="checkbox"/> Facility Design <input type="checkbox"/> Operations <input type="checkbox"/> Other (please specify):			

Part V: Facility Information (continued)

Facility Type (check one): Landfill VRP Transfer Station Biomedical Waste Facility

3. SOLID WASTE STORAGE VOLUMES: List the maximum on-site storage and storage method for each type of unprocessed and processed material. Storage of most waste materials require use of covers, secondary containment, impervious surfaces, and other measures as needed to prevent pollution.

Type of Solid Waste	Maximum Volume of On-Site Storage	Storage Method <small>*waste must be stored under cover</small>
*Antifreeze Liquid (gallons) (gl)		
Appliances with CFC (Freon) (units)		
*Asbestos Containing Material (cy)		
*Batteries, Lead-Acid (vehicle) (units)		
*Biomedical Waste (cy)		
*Capacitors, Fluorescent Lght Ballasts (only from residential sources) (gl)		
*Cardboard (cy)		
*Casting Sand (cy)		
*Coal Fly Ash (cy)		
*Construction and Demolition Waste (cy)		
*Contaminated Dredge Spoils (cy)		
*Contaminated Soils (cy)		
*Covered Electronic Devices (kg) or (cy)		
*Food/Beverage Containers and Plastic Containers (cy)		
*Industrial (e.g., slag, sludge) (cy)		
*Metal, Scrap (cy)		
*Mixed Municipal Solid Waste (cy)		
*Oil Filters (cy)		
*Oil, Used (gl)		
Oversized MSW (furniture, mattresses, rugs and carpets) (cy)		

Part V: Facility Information (continued)

Facility Type (check one): Landfill VRP Transfer Station Biomedical Waste Facility

Type of Solid Waste	Maximum Volume of On-Site Storage	Storage Method <small>*waste must be stored under cover</small>
*Paints and Stains (gl)		
*Paper (cy)		
Propane Tanks with Valves (units)		
*Residue (i.e., ash generated from the combustion process at a Resource recovery facility) (cy)		
*Scrap Tires (crumb rubber) (cy)		
*Scrap Tires (shreds) (cy)		
*Scrap Tires (whole) (cy)		
*Sludge Ash (cy)		
*Sludge (drinking water treatment plant; e.g., alum)		
*Sludge (wastewater treatment plant) (cy)		
Swap Shop: Household Items		
Textiles and Shoes		
Wood, Clean – processed (wood chips) (cy)		
Wood, Clean – unprocessed (land clearing debris, brush, pallets) (cy)		
*Wood, Treated (painted, creosoted, etc.) (cy)		
Yard Waste (leaves and grass clippings) (cy)		
<input type="checkbox"/> Check here if additional sheets are necessary, and label and attach them to this sheet.		

Part V: Facility Information (continued)

Facility Type (check one): Landfill VRP Transfer Station Biomedical Waste Facility

Type of Solid Waste	Maximum Volume of On-Site Storage	Storage Method <small>*waste must be stored under cover</small>
<i>Universal Waste</i> <i>Note: the combined weight of all universal waste stored on-site shall not exceed 5000 kg</i>		
*Electronics, Used (kg)		
*Mercury Containing Lamps (kg)		
*Mercury Containing Thermometers, Thermostats (kg)		
*Batteries, Mixed (kg)		
<i>Other material(s) (kg/lbs/cy/gl/units)</i>		
<input type="checkbox"/> Check here if additional sheets are necessary, and label and attach them to this sheet.		

Part VI: Supporting Documents

Be sure to read the instructions (DEP-SW-INST-100) for information on completing the following attachments. Check the appropriate box for each attachment being submitted to verify that *all* applicable attachments have been submitted. When submitting any supporting documents:

- (1) **label each document** with its respective attachment letter (e.g., Attachment A, etc.);
- (2) **include the applicant's** name as entered on Part I of the *Permit Application Transmittal Form*.

<input type="checkbox"/>	Attachment A:	Executive Summary
<input type="checkbox"/>	Attachment B:	<i>Applicant Compliance Information</i> (DEP-APP-002)
<input type="checkbox"/>	Attachment C:	An 8-1/2" x 11" copy of the relevant portion or an original of a United States Geological Survey (USGS) Topographic Quadrangle Map (scale: 1:24,000) with the regulated activity or project site outlined or pinpointed, as appropriate. (Not required for applications to construct and operate a solid waste disposal area (landfill).)
<input type="checkbox"/>	Attachment D:	<i>Coastal Consistency Review Form</i> (DEP-APP-004)
<input type="checkbox"/>	Attachment E:	CT NDDDB Information
<input type="checkbox"/>	Attachment F:	Conservation or Preservation Restriction Information, if applicable.
<input type="checkbox"/>	Attachment G:	Copy of the Written Environmental Justice Public Participation Plan Approval Letter, if applicable. (Also, a final report documenting the implementation of the Environmental Justice Public Participation Plan is to be prepared and submitted before the Department issues a Notice of Tentative Determination.)
<input type="checkbox"/>	Attachment H:	<i>Background Information</i> (DEP-SW-APP-101)
<input type="checkbox"/>	Attachment I:	<i>Statement of Consistency with Solid Waste Management Plan</i> (DEP-SW-APP-102)
<input type="checkbox"/>	Attachment J:	<i>Business Information</i> (DEP-SW-APP-103)
<input type="checkbox"/>	Attachment K:	Facility Plan (i.e. transfer stations; volume reduction plants “resource recovery facility, composting, construction and demolition waste, land clearing/clean wood, sludge processing, intermediate processing center”; biomedical waste treatment facility) <input type="checkbox"/> Engineering drawings such as area map/site plan/architectural and mechanical drawings; cross sections and specifications; mass balance diagrams; etc. <input type="checkbox"/> Operation and Management Plan
<input type="checkbox"/>	Attachment L:	<i>Determination of Need Information</i> (DEP-SW-APP-104) (Required only for applications to construct and operate ash residue and mixed municipal solid waste landfills, construction or expansion of resources recovery facilities and mixed municipal solid waste composting facilities.)
<input type="checkbox"/>	Attachment M:	<i>Checklist for Solid Waste Disposal Areas (Landfills)</i> (DEP-SW/WD-APP-110)
<input type="checkbox"/>	Attachment N:	<i>Certification Regarding Activities Previously Licensed by DEP</i> (DEP-SW-APP-105)

Part VII: Applicant Certification

The applicant(s) *and* the individual(s) responsible for actually preparing the application must sign this part. An application will be considered insufficient unless *all* required signatures are provided.

<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 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 this application is on complete and accurate forms as prescribed by the commissioner without alteration of the text.</p> <p>I certify that I will comply with all notice requirements as listed in Section 22a-6g of the General Statutes.”</p>	
<hr/> Signature of Applicant	<hr/> Date
<hr/> Name of Applicant (print or type)	<hr/> Title (if applicable)
<hr/> Signature of Preparer (if different than above)	<hr/> Date
<hr/> Name of Preparer (print or type)	<hr/> Title (if applicable)
<p><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 application (i.e., professional engineers, consultants, etc.).</p>	

Please submit::

- (1) Permit Application Transmittal Form;
- (2) completed Application Form;
- (3) all required Supporting Documents;
- (4) One copy of the entire package; and
- (5) Fee.

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

Please remember to publish notice of the permit application immediately after submitting your completed application to DEP. Within five business days of the date the application is filed with DEP, send a copy of the notice to the chief elected official of the municipality in which the regulated activity is proposed, and provide DEP with the “Certification of Notice Form (DEP-APP-005A)” and an affidavit of publication from the newspaper.