



**Connecticut Department of  
Energy & Environmental Protection**  
Bureau of Natural Resources  
Fisheries Division

## DEEP Fisheries Consultation Form

**To the Applicant** - Prior to the submission of your license application to the Connecticut Department of Energy & Environmental Protection (DEEP) Water Planning and Management Division (WPMD) or Land and Water Resources Division (LWRD) or Water Permitting and Enforcement Division (WPED), please complete Part I below and e-mail the following to [deep.inland.fisheries@ct.gov](mailto:deep.inland.fisheries@ct.gov):

1. this completed DEEP *Fisheries Consultation Form*;
2. a site location map,
3. a PDF version of the proposed project plans including a site survey of existing conditions (if available), and
4. photos of the site.

Fisheries Division staff will contact you if further details are needed. Once the Fisheries Division staff returns the completed form to you, please include the form, and any signed plans (if applicable) in your license application submittal to DEEP.

### Part I: Applicant and Site Information *(to be completed by APPLICANT)*

#### 1. Applicant/Registrant Information

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Business Phone: \_\_\_\_\_ Ext.: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

#### 2. Engineer/Surveyor/Agent Information (list as applicable)

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Business Phone: \_\_\_\_\_ Ext.: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_  
 Service Provided: \_\_\_\_\_

#### 3. Site Location:

Name of Site: \_\_\_\_\_  
 Address of Site or Location Description: \_\_\_\_\_  
 City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Parcel Location/Tax Assessor's Reference: Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_  
 Name of Stream or Waterbody: \_\_\_\_\_

#### 4. Activity: Check the box best describing your activity: (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> new public/fishing access;   | <input type="checkbox"/> maintenance dredging   |
| <input type="checkbox"/> new docks and marinas on the Connecticut River;  | <input type="checkbox"/> beach nourishment  |
| <input type="checkbox"/> coastal/tidal dredging projects;   | <input type="checkbox"/> cofferdam installation   |
| <input type="checkbox"/> activities in inland/non-tidal waterbodies and watercourses;   | <input type="checkbox"/> conducting construction activity within a 100-foot buffer of a Cold Water Stream Habitat |
| <input type="checkbox"/> withdrawal of water from a non-tidal/inland river, stream, pond or lake;   |   |
| <input type="checkbox"/> withdrawal of water from a wetland, marsh, swamp, or bog hydrologically connected to a non-tidal/inland river, stream, pond or lake; |   |
| <input type="checkbox"/> withdrawal of groundwater from stratified drift deposits hydrologically connected to a non-tidal/inland river, stream, pond or lake. |   |

Note: Fisheries consultation is **not required** for docks and marinas on Long Island Sound.

**Part I: Applicant and Site Information (to be completed by APPLICANT) (continued)**

**5. DEEP Pre-application Contact:** Indicate name of permit analyst or engineer, if applicable.  
\_\_\_\_\_

**6. Project Description:** Provide or attach a brief, but thorough, description of the project including any measures to protect, enhance or restore fish populations:  
\_\_\_\_\_

**Part II: Fisheries Determination (To be completed by DEEP Fisheries Staff only)**

**To Fisheries Staff** - This completed consultation form is required to be submitted as part of an application to DEEP. The application has not yet been submitted to DEEP. Please review the enclosed materials and determine whether the project will significantly impact any fisheries or fisheries habitat. You may provide comments or recommendations regarding the proposal. Send this completed form to the applicant and copy the DEEP analyst, if known, or the applicable WPMD/LWRD/WPED Supervisor. If the proposed work **WILL** significantly impact any fisheries and/or habitat or if you have any comments or concerns regarding the regulatory review for this project, contact the DEEP analyst, if known, or the applicable WPMD/LWRD/WPED Supervisor.

**DEEP FISHERIES DIVISION DETERMINATION**

Date Consultation Form received: \_\_\_\_\_

Please check applicable boxes and return the completed Consultation Form to the applicant:

- I have determined that the work described in Part I of this form and attachments **WILL NOT** significantly impact any fisheries and/or habitat;
- I have determined that the work described in Part I of this form and attachments **WILL NOT** significantly impact any fisheries and/or habitat **if the below Recommendations are followed**; and/or,
- I have determined that the work described in Part I of this form and attachments **WILL NOT** significantly impact any fisheries and/or habitat **if the design features shown on the attached plans are incorporated**. Fisheries staff to sign and date plans and return to the applicant with the completed Consultation Form.

COMMENTS/RECOMMENDATIONS (or check here if these are attached following this page:  ):

\_\_\_\_\_

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"By entering my name below, I agree that I am providing my legal signature, and am legally bound by the determination above."

\_\_\_\_\_  
Signature of Fisheries Division Staff

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name of Fisheries Division Staff

\_\_\_\_\_  
Title