Part 2 Application Form

Engineered Control Variance

**DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION**

**BUREAU OF WATER PROTECTION AND LAND REUSE**

REMEDIATION DIVISION [www.ct.gov/deep/remediation](http://www.ct.gov/deep/remediation)

Please complete this application to apply for a variance to use an engineered control of polluted soils as required pursuant to the Remediation Standards Regulations, section 22a-133k-2(f)(2) (RSRs) of the Regulations of Connecticut State Agencies. *Attach all information as indicated by the pertinent sections of this form.* All sections of this form must be filled out, as applicable.

The Part 2 Application Form must be [submitted electronically](https://portal.ct.gov/DEEP/Remediation--Site-Clean-Up/Transmittal-of-Documents) by uploading the document to the Connecticut [Secure File Transfer (SFT) website](https://sft.ct.gov/) using the [Electronic Document Transmittal Form](https://portal.ct.gov/-/media/DEEP/site_clean_up/sites/ElectronicDocumentTransmittalFormdocx.docx) ([embedded as the first page](https://portal.ct.gov/DEEP/Remediation--Site-Clean-Up/Transmittal-of-Documents#pdf) of the electronic document).

**Site Identification** Rem ID#:

|  |
| --- |
| Site Name:  Site Address:  City/Town:State: Zip Code:  Name of Environmental Professional:  Name of Certifying Party or Property Owner (as appropriate):    Name of Property Owner, if different from Responsible Party:    Name of DEEP Case Manager:Date of Part 1 Application Submission: |

**Design of Engineered Control**

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|  | Detailed design plans and specifications (signed and sealed by PE) that indicate the engineered control will function with minimum maintenance, will promote drainage and minimize erosion of engineered control, and will accommodate settling and subsidence of the underlying soil |  |

**Schedule for Implementation**

|  |  |  |
| --- | --- | --- |
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|  | Time schedule or estimated date for full implementation of Engineered Control |  |

**Measures to Maintain Structural Integrity, Function, and Effectiveness of Engineered Control**

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|  | Plan & schedule for inspection |  |
|  | Plan & schedule for maintenance and repairs, if necessary |  |
|  | Groundwater monitoring plan (if required) |  |
|  | Plan & schedule for reporting |  |
|  | Conceptual Environmental Use Restriction |  |
|  | Property Owner acknowledges and consents to the EC and EUR |  |

**Plan & Schedule for Financial Assurance**

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|  | Justification for amount of financial assurance which equals the cost of 20% of 30 years of operation, maintenance, inspection, monitoring, and reporting and is adjusted for inflation every 5 years |  |

Note: the listed items are not all inclusive of the discussion/documentation required in the various submissions required in an Engineered Control Application.

**Applicant Certification**

|  |  |  |
| --- | --- | --- |
| “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 those individuals responsible for obtaining the information, that the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that any false statement made in the submitted information may be punishable as a criminal offense under section 53a-157b of the Connecticut General Statutes and any other applicable law”. | | |
|  |  |  |
| Signature of Applicant | Date |
|  |  |  |
| Name of Applicant (print or type) | | Title (if applicable) |
| Representing:  Mailing Address:  City/Town:State: Zip Code:  Phone: Email: | | |

**Environmental Professional Certification (Optional)**

|  |  |  |  |
| --- | --- | --- | --- |
| "I certify that the proposed Engineered Control and associated plans for inspection, maintenance, monitoring, reporting and financial assurance are protective of human health and the environment in accordance with section 22a-133k-2(f)(2) of the RCSA." | | | |
|  |  |  | |
| Name of Environmental Professional |  | License Number (if LEP or PE) | |
|  |  |  | |
| Signature of Environmental Professional |  | Date | |
| Title:  Company:  Address:  City/Town:  State:  Zip Code:  Phone: | | | |
| Email: | | | |
|  | | |  |