Municipal Registration Form for Regulated Activities in Aquifer Protection Areas

AGENCY USE ONLY
Application No. _____
Registration No. _____
Permit No. _____
APA Name _____
Date of Receipt _____

This registration form is for registering regulated activities in Aquifer Protection Areas in accordance with Section 7of the Aquifer Protection Area Regulations in the Town of Newtown.

Print or type unless otherwise noted. You must submit the registration fee along with this form.

Part I: Registration Type

Check the appropriate box identifying the registration type.

This registration is for (check one):	Please identify any previous or existing aquifer protection registration/ permit number in the space provided:
☐ A *new* registration	_____
☐ A *renewal* of an existing registration	_____
☐ A *modification* of an existing registration*	
☐ A registration for a *vacant site/inactive activity***	

*Note that if you are seeking a *modification*, you should consult the Newtown Aquifer Protection Agency at 203-270-4276 prior to submitting a registration to determine whether a registration form is necessary.
**Note that if you are registering a *vacant site* where currently no regulated activity is taking place, you must certify that applicable best management practices are being met at the site.

Part II: Fee Information

The Permit Fee Schedule is in Section 18(d) of the Aquifer Protection Area Regulations. Please submit proper fee with the registration form. A registration shall not be deemed complete and no activity will be authorized by this registration unless the registration fee has been paid in full. The registration will not be processed without the fee. The fee shall be non-refundable and shall be paid by check or money order to "The Town of Newtown."

Part III: Registrant Information

1. Fill in the name of the registrant(s).

Name of Registrant: Name of Company:

Mailing Address:

City/Town: State: Zip Code:

Business Phone: Ext. Fax:

E-mail Address:

Registrant's interest in property or facility at which the proposed activity is to be located: (check all that apply)

☐ site owner ☐ option holder ☐ lessee ☐ facility owner

☐ easement holder ☐ operator ☐ other (specify):

☐ Check here if there are co-registrants. If so, label and attach additional sheet(s) to this sheet with the required information.

Part III: Registrant Information (continued)

2. List primary contact for departmental correspondence and inquiries. (Please complete all fields.)

   Name:

   Mailing Address:

   City/Town: State: Zip Code:

   Business Phone: ext. Fax:

   Contact Person: Title:

   E-mail address:

3. List attorney or other representative, if applicable:

   Firm Name:

   Mailing Address:

   City/Town: State: Zip Code:

   Business Phone: ext. Fax:

   Attorney:

4. Facility Operator:

   Name:

   Mailing Address:

   City/Town: State: Zip Code:

   Business Phone: ext. Fax:

   Contact Person:

   Title:

5. Facility Owner:

   Name:

   Mailing Address:

   City/Town: State: Zip Code:

   Business Phone: ext. Fax:

   Contact Person: Title:

6. List any engineer(s) or other consultant(s) employed or retained to assist in preparing the registration or in designing or constructing the activity.

   Name:

   Mailing Address:

   City/Town: State: Zip Code:

   Business Phone: ext. Fax:

   Contact Person: Title:

   Service Provided:

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

Part IV: Facility Information

1. Name of facility:

   Street Address or Description of Location:

   City/Town: State: Zip Code:

2. From the following list, check *all* regulated activities being conducted at the facility.

   Regulated Activity: For a full description of each regulated activity see Section 2 of the Aquifer Protection Area Regulations of the Town of Newtown or Appendix A of the Instructions (Form AP10-04a).

- ☐ (A) Underground storage or transmission of oil or petroleum
- ☐ (B) Oil or petroleum dispensing for the purpose of retail, wholesale or fleet use
- ☐ (C) On-site storage of hazardous materials for the purpose of wholesale sale
- ☐ (D) Repair or maintenance of vehicles or internal combustion engines of vehicles
- ☐ (E) Salvage operations of metal or vehicle parts
- ☐ (F) Wastewater discharges to ground water other than domestic sewage and stormwater
- ☐ (G) Car or truck washing (unsewered)
- ☐ (H) Production or refining of chemicals
- ☐ (I) Clothes or cloth cleaning service (dry cleaner)
- ☐ (J) Industrial laundry service (unsewered)
- ☐ (K) Generation of electrical power by means of fossil fuels (power plants)
- ☐ (L) Production of electronic boards, electrical components, or other electrical equipment
- ☐ (M) Embalming or crematory services (unsewered)
- ☐ (N) Furniture stripping operations
- ☐ (O) Furniture finishing operations
- ☐ (P) Storage, treatment or disposal of hazardous waste under a RCRA permit (hazardous waste facility)
- ☐ (Q) Biological or chemical testing, analysis or research (unsewered)
- ☐ (R) Pest control services
- ☐ (S) Photographic finishing (unsewered)
- ☐ (T) Production or fabrication of metal products
- ☐ (U) Printing, plate making, lithography, photoengraving, or gravure
- ☐ (V) Accumulation or storage of waste oil, anti-freeze or spent lead-acid batteries (recycling facility under a state DEP General Permit)
- ☐ (W) Production of rubber, resin cements, elastomers or plastic
- ☐ (X) Storage of de-icing chemicals (salt storage facility, fleet, state or municipal garage)
- ☐ (Y) Accumulation, storage, handling, recycling, disposal, reduction, processing, burning, transfer or composting of solid waste (under a state DEP permit; a solid waste facility, landfill, transfer station, composting facility, processing center)
- ☐ (Z) Dying, coating or printing of textiles, or tanning or finishing of leather
- ☐ (AA) Production of wood veneer, plywood, reconstituted wood or pressure-treated wood
- ☐ (BB) Pulp production processes

Part V: Best Management Practices

The registrant and operator, if different from the registrant, must certify that the facility is in compliance with all the best management practices set forth in Section 12 of the Aquifer Protection Area Regulations. The registrant and the operator, if different from the registrant, must sign this part. A registration will be considered incomplete unless the required signatures are provided.

For a full description of Best Management Practices (BMP's) for regulated activities, see Section 12 of the Aquifer Protection Area Regulations or Appendix B of the Instructions, Form AP10-04a.

"I certify that the subject facility is in compliance with all the best management practices set forth in Section 12 of the Aquifer Protection Area Regulations. I have checked the box by each of the following statements as verification that the subject facility is in compliance with all applicable best management practices. "

☐ Storage of hazardous materials above ground is in compliance with all provisions of Section 4 of the Aquifer Protection Area Regulations.

☐ The number of underground storage tanks used to store hazardous materials shall not increase in accordance with Section 9(d)(2)(B) of the Aquifer Protection Area Regulations.

☐ Replacement of any underground storage tanks used to store hazardous materials shall take place in accordance with all provisions of Section 12 of the Aquifer Protection Area Regulations.

☐ Devices for release of wastewaters to the ground shall not be used except in accordance with Section 12 of the Aquifer Protection Area Regulations.

☐ A Materials Management Plan has been developed in accordance with Section 12(a)(5) of the Aquifer Protection Area Regulations and will be implemented upon issuance of a registration.

Signature of Registrant	Date
Name of Registrant (print or type)	Title (if applicable)
Signature of Operator (if different than above)	Date
Name of Operator (print or type)	Title (if applicable)

Part VI: Supporting Documents

Please check the box by the attachments being submitted as verification that *all* applicable attachments have been submitted with this registration form. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be sure to include the registrant's name.

☐ Attachment A: A Facility Boundary Map *(Required for all Registrations)*

An 8" X 11" copy of the relevant portion of a USGS Topographic Quadrangle Map with the exact location of the facility* (property) boundaries shown. A larger scale [local property or assessor's] map with the facility boundaries shown, may also be submitted to clarify boundary locations. For sample maps see Figures A and B of the instructions, Form AP10-04a.

*Note: In accordance with Section 2 of the Aquifer Protection Area Regulations, "facility" is defined as property where a regulated activity is being conducted by any person, including without limitation any buildings located on the property that are owned or leased by that person; and includes contiguous land owned, leased, or for which there is an option to purchase by that person.

☐ Attachment B: Materials Management Plan, *if requested by the Agency.*

☐ Attachment C: Stormwater Management Plan, *if requested by the Agency.*

(continued on the following page)

Part VII: 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.

"I have personally examined and am familiar with the information submitted in this document and all attachments, and I certify, 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 understand that any false statement made in the submitted information is punishable as a criminal offense, under Section 53a-157b of the General Statutes and any other applicable law.

I understand that the agency or its duly authorized agent may make regular inspections of the facility and associated property, except a private residence, at reasonable hours.

I certify that this application is on complete and accurate forms as prescribed by the Agency without alteration of the text."

Signature of Registrant	Date
Name of Registrant (print or type)	Title (if applicable)
Signature of Preparer (if different than above)	Date
Name of Preparer (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.

Please submit the Registration Form, Fee, and all Supporting Documents to:

Aquifer Protection Agency
Town of Newtown
Newtown Municipal Center
3 Primrose Street
Newtown, CT 06470

The registrant shall also mail a copy of this completed form to the following:

- Commissioner of the Department of Environmental Protection,
- Commissioner of Public Health, and
- The affected water company.

See Appendix C of the instructions for contacts and mailing addresses.