



TOWN OF EAST LYME  
**AQUIFER PROTECTION AGENCY**

**Application  
To Register a Facility or Activities  
In an Aquifer Protection Area**

This application form is for registering a facility in the Aquifer Protection Area of either Gorton Pond Well Field or the Dodge Pond Well Field in accordance with the Aquifer Protection Area Regulations of the Town of East Lyme.

You must mail a copy of the completed form to each of the Commissioners of state Departments of Energy and Environmental Protection and Public Health, as well as The Town of East Lyme Water Department.

**AGENCY USE ONLY**

Date of Filing \_\_\_\_\_  
Date of Receipt \_\_\_\_\_  
Fee **\$NO FEE FOR REGISTRATION** \_\_\_\_\_  
Application No. \_\_\_\_\_  
APA Name \_\_\_\_\_  
Facility Name \_\_\_\_\_  
Map / Lot \_\_\_\_\_  
Previous Registration / Permit No. \_\_\_\_\_

**Registration Type**

Check the appropriate box identifying the registration type.

This application is for (check one):

- ☐ A new registration for a facility  
☒ A renewal of an existing registration  
☐ A modification of an existing registration\*  
☐ A registration for a vacant site\*\*  
☐ A transfer of a registration

\* Note that if you are seeking a *modification*, you should consult the Aquifer Protection Agency at (860) 691-4114 prior to submitting an application to determine whether a registration or permit 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.

**Applicant Information**

Indicate if the party to be the primary contact for correspondence or inquiries is different than the applicant.

**Applicant(s)**

Name of Applicant: Greg Peterson Name of Company: Monro Inc.  
Mailing Address: 200 Hollister Parkway  
City/Town: Rochester State: NY Zip Code: 14615  
Business Phone: 585-784-3283 ext. \_\_\_\_\_ Cell Phone: 585-746-3660  
E-mail address: greg.peterson@monro.com Fax: N/A

Applicant'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): \_\_\_\_\_

**Engineer or other consultant**

Name of Company: Sentinel Technology Service Provided: Environmental Consulting  
 Contact Person: Don Seymour Title: President  
 Mailing Address: 5505 Route 19A  
 City/Town: Castile State: NY Zip Code: 14427  
 Business Phone: 585-493-2744 ext. \_\_\_\_\_ Cell Phone: 585-750-2393  
 E-mail address: Sentnc@Frontier.net Fax: 585-298-5299

**Attorney or other representative**

Name of Firm: Monro Service Provided: Legal  
 Contact Person: Maureen Mulholland Title: VP-General Counsel  
 Mailing Address: 200 Hollister Parkway  
 City/Town: Rochester State: NY Zip Code: 14615  
 Business Phone: 585-784-3452 ext. \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 E-mail address: Maureen.Mulholland@monro.com Fax: 585-647-0947

**Facility**

Name: Monro Brake & Tire #1450  
 Street Address: 252 Flanders Road Assessor's Map / Lot: \_\_\_\_\_

**Facility Owner**

Name: QPO Properties LLC  
 Contact Person: Justin Olshan Member Title: \_\_\_\_\_  
 Mailing Address: 1 Darnows Ridge  
 City/Town: East Lyme State: CT Zip Code: 06333  
 Business Phone: 860-608-7757 ext. \_\_\_\_\_ Cell Phone: 860-608-7757  
 E-mail address: Qproperties@hotmail.com Fax: N/A

**Facility Operator**

Name: Monro Inc.  
 Contact Person: Greg Peterson Title: Director of Facilities and Assets  
 Mailing Address: 200 Hollister Parkway  
 City/Town: Rochester State: NY Zip Code: 14615  
 Business Phone: 585-784-2283 ext. \_\_\_\_\_ Cell Phone: 585-746-3660  
 E-mail address: greg.peterson@monro.com Fax: N/A

Please verify that all applicable attachments have been submitted with this application form (check each box).

- ☐ A Facility Boundary Map (required for all applications)

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.

- ☐ Materials Management Plan, if requested by the Agency.

- ☐ Stormwater Management Plan, if requested by the Agency.



**Activity Information**

For a full description of each regulated activity, see the Aquifer Protection Area Regulations.

Underground storage or transmission of oil or petroleum	<input type="checkbox"/>
Oil or petroleum dispensing for the purpose of retail, wholesale or fleet use	<input checked="" type="checkbox"/>
On-site storage of hazardous materials for the purpose of wholesale sale	<input type="checkbox"/>
Repair / maintenance of vehicles or internal combustion engines of vehicles	<input checked="" type="checkbox"/>
Salvage operations of metal or vehicle parts	<input type="checkbox"/>
Wastewater discharges to groundwater other than domestic sewage or stormwater	<input type="checkbox"/>
Car or truck washing (unsewered)	<input type="checkbox"/>
Production or refining of chemicals	<input type="checkbox"/>
Clothes or cloth cleaning service (dry cleaner)	<input type="checkbox"/>
Industrial laundry service (unsewered)	<input type="checkbox"/>
Generation of electrical power by means of fossil fuels (power plants)	<input type="checkbox"/>
Production of electronic boards, components, or other electrical equipment	<input type="checkbox"/>
Embalming or crematory services (unsewered)	<input type="checkbox"/>
Furniture stripping operations	<input type="checkbox"/>
Furniture finishing operations	<input type="checkbox"/>
Storage, treatment or disposal of hazardous waste under a RCRA permit	<input type="checkbox"/>
Biological or chemical testing, analysis or research (unsewered)	<input type="checkbox"/>
Pest control services	<input type="checkbox"/>
Photographic finishing (unsewered)	<input type="checkbox"/>
Production or fabrication of metal products	<input type="checkbox"/>
Printing, plate making, lithography, photoengraving, or gravure	<input type="checkbox"/>
Accumulation or storage of waste oil, anti-freeze or spent lead-acid batteries (recycling facility under a state DEP General Permit)	<input type="checkbox"/>
Production of rubber, resin cements, elastomers or plastic	<input type="checkbox"/>
Storage of de-icing chemicals (salt facility, fleet, state or municipal garage)	<input type="checkbox"/>
Accumulation, storage, handling, recycling, disposal, reduction, processing, burning, transfer or composting of solid waste (under a DEP permit; a solid waste facility, landfill, transfer station, composting facility, processing center)	<input type="checkbox"/>
Dyeing, coating or printing of textiles, or tanning or finishing of leather	<input type="checkbox"/>
Production of wood veneer, plywood, reconstituted or pressure-treated wood	<input type="checkbox"/>
Pulp production processes	<input type="checkbox"/>

**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 the Aquifer Protection Area Regulations.

"I certify that the subject facility is in compliance with all the best management practices 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 the Aquifer Protection Area Regulations.
- ☒ The number of underground storage tanks used to store hazardous materials shall not increase in accordance with 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 the Aquifer Protection Area Regulations.
- ☒ Devices for release of wastewaters to the ground shall not be used except in accordance with the Aquifer Protection Area Regulations.
- ☒ A Materials Management Plan has been developed in accordance with the Aquifer Protection Area Regulations and will be implemented upon issuance of a registration.

Signature of Applicant

Date

Name of Applicant (print or type)

Title (if applicable)

Signature of Operator (if different than above)

Date

Name of Operator (print or type)

Title (if applicable)

**Applicant Certification**

The applicant *and* the individual(s) responsible for actually preparing the application must sign this part. An application 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 Applicant

Date

Name of Applicant (print or type)

Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)



# MONRO MUFFLER

## EMERGENCY SPILL PLAN

This policy has been developed and implemented to meet the requirements of the State of Connecticut regarding spills of oil and/or hazardous materials. In order to comply with these regulations, protect the environment, and ensure the ability of Monro Muffler and its' employees to have a safe and healthy work environment, the steps and procedures outlined in this plan shall be strictly complied with. To accomplish this goal, each employee will be provided training on the plan, be given a copy of the plan, and sign the attached verification that they have been provided the necessary instruction and will abide by the outlined procedures.

**In addition, a copy of this plan shall be posted in the Vehicle Repair area in a place that is accessible by all employees at any time of the day.**

In discussion with the Connecticut Department of Environmental Protection, it has been determined that a "Non-Deminimis" reporting requirement is currently enforced. What this means is that any amount of oil and/or hazardous materials that are spilled/released must be reported.

This plan will outline the procedures that have been adopted by Monro Muffler to meet this reporting requirement, and the steps that are to be taken by employees to control and clean-up the spill.

The most effective Spill Plan involves the handling and use of oils and/or hazardous materials in a safe and controlled manner. Although, Monro is sure that their employees attempt to work under those conditions, we must prepare for the event whereby these materials are released to the environment.

Over the next several pages you will find the EMERGENCY SPILL PROCEDURES, COMPANY SPILL REPORTING FORM, and the outline of necessary notifications that Monro has determined to implement in order to meet the requirements of the State of Connecticut.

# EMERGENCY SPILL PROCEDURES

## STORE PERSONNEL

Every spill must be reported to the Market Manager regardless of the time. The appropriate telephone numbers are listed at the end of this procedure. Obviously, if the spill is still occurring, or if there is immediate danger to safety, the actions below must come before the notification.

**STEP 1** – Determine the source of the leak or spill.

**STEP 2** – Stop any more material from leaking if possible by performing one of the following:

- Upright the overturned container, or;
- Shut-off equipment that is transferring material, or;
- Plugging of holes, tears, or openings in container, or;
- Dike areas with materials supplied in Spill Kit.

**STEP 3** – If you can't stop or contain the spill, remove all possible sources of ignition to prevent possible fire or explosion. If a vehicle is sitting in the spill, do not move it.

**STEP 4** – Remove all non-essential personnel from the immediate area. Block the area to traffic, both vehicle and pedestrian. ***Work on vehicles will be terminated until such time as the released material has been removed from the store.***

**STEP 5** – Contain the spill to prevent the material from spreading.

- Put on personal protective equipment (gloves and goggles).
- Using equipment provided in the Spill Kit, cat litter, absorbent pads and/or booms, additional absorbent, stop the spread of materials.
- Allow the absorbent adequate time to soak up the material, then sweep it up and place the used absorbents, pads, booms, etc, into the disposal drum at the site.
- When the disposal drum is nearly full, contact G. Peterson, Director of Facilities, to make the necessary arrangements to have this drum picked up for regulatory disposal.
- Perform inventory of spill kit, absorbents, etc., to determine if replacements are needed. Contact G. Peterson, Director of Facilities, for additional supplies, if needed.

### ***!VERY IMPORTANT!***

***DO EVERYTHING POSSIBLE TO PREVENT MATERIALS FROM ENTERING STORM, SANITARY, OR OTHER DRAINS!***

**IF CONDITIONS ARE SUCH THAT STORE PERSONNEL CANNOT DEAL WITH THE INCIDENT OR IF IMMEDIATE DANGER TO LIFE AND PROPERTY IS PRESENT CONTACT THE FIRE DEPARTMENT FOR ASSISTANCE.**

**STEP 6** – If the spill/release was the result of failure or breakage of oil storage and/or transfer equipment, this equipment is to be immediately taken out-of-service until such time as the necessary repairs are completed. It will be the responsibility of the Market Manager to ensure that these repairs are given immediate attention.

**STEP 7** – No statements are to be given to the media. Refer all Media to Monro's corporate offices.

**STEP 8** – Once the situation is under control and the Market Manager has been contacted by telephone, it is important that the Store Manager, Assistant Manager, or Employee in Charge fill out the attached Spill Report Form. Email the completed form to [greg.peterson@monro.com](mailto:greg.peterson@monro.com), as soon as possible after all information has been generated. A copy of this report is to be kept on file at the store, with an additional copy to be maintained by the District Manager.

***Common Sense must be used regarding the treatment of a spill or any other hazard.***

The above procedures are suggested guidelines. Each incident is different and may require more comprehensive measures than are outlined in this text. If in doubt about how to handle this type of situation, and you are unable to contact your Market Manager, call Greg Peterson at 585-784-3283.

**NOTE: WASHING OF FLOORS WITH THE WASTEWATER BEING DISCHARGED OUT OF THE DOORS INTO A PARKING AND/OR DRIVING AREA WILL NOT BE ALLOWED UNDER ANY CIRCUMSTANCES. FLOORS ARE TO BE SWEEPED PRIOR TO WASHING TO REDUCE THE AMOUNT OF SOLIDS AND/OR WASTES THAT COULD ENTER THE DRAINS.**

**STORES WITHOUT FLOOR DRAINS SHOULD UTILIZE FLOOR DRY AND DRY MOPS TO CLEAN THEIR FLOORS. FLOOR SHOULD BE PICKED UP IMMEDIATELY, DOUBLE BAGGED AND DISPOSED OF IN THE DUMPSTER.**



# EMERGENCY SPILL PROCEDURES

## DISTRICT MANAGER

As previously stated, Connecticut requires that all spills involving oils and/or hazardous materials be reported to the Department of Environmental Protection. To ensure continuity and maintain a single point of contact, Monro Muffler has designated the District Manager as the person responsible to fulfill this requirement.

To accomplish this, the District Manager will take the following actions:

**STEP 1** – When receiving the telephone call from the store, gather the following information:

- Date of spill
- Time of spill
- Person making notification
- Material spilled
- Amount spilled
- Has spill been stopped
- Has spill been cleaned up
- Were any resources affected, (land, water, air, drainage systems)
- Was Fire Department or other outside agency involved

**STEP 2** – Make the notification to the Connecticut Department of Environmental Protection at 1-860-424-3338. Give them the information that you were able to receive from the store and determine if they will require additional actions. Make sure that a Spill Number is assigned and that you are given this number for Monro records. Ask if a Spill Response person will be traveling to the store.

**Request that "Report of Petroleum or Chemical Product Discharge, Spillage, Seepage, Filtration" be forwarded to your attention. This form must be completed and mailed within 24 hours of the incident.**

**STEP 3** – Contact the store to determine if any additional information or items of concern have arisen. Give the Spill Number to the Store Manager so that it can be entered on the Monro reporting form.

**STEP 4** – Contact Greg Peterson at 585-784-3283, to advise of the spill and status of clean-up.

**STEP 5** – Travel to the store to confirm the following:

- Situation was as reported
- Clean-up is under way or complete
- All equipment is in good working condition
- All necessary information has been placed onto the reporting form
- Replacement of absorbent materials and equipment, as needed
- Maintain record of spill(s) that material has been placed into disposal drum



- Ensure copy of completed report form is emailed to the Corporate Offices

**STEP 6** – When store advises that disposal drum is full, notify Greg Peterson, Director of Facilities, to have drum picked up by a registered disposal firm and provide empty drum for future use.

**STEP 7** – Ensure that all forms, letters, and any other information generated by a spill event are forwarded immediately to Greg Peterson, Director of Facilities.

**IT IS THE RESPONSIBILITY OF THE MARKET MANAGER TO MAKE SURE THAT ALL EMPLOYEES ARE PROVIDED TRAINING ON THIS PLAN, GIVEN A COPY OF THE PLAN, AND THAT ALL EMPLOYEES FOLLOW THE POLICIES AND PROCEDURES OUTLINED.**

#### **DIRECTOR OF FACILITIES**

The Director of Facilities will be responsible for the tracking of spill incidents, replacement of spill kits and absorbent materials, disposal of generated materials, and reporting to the State of Connecticut to ensure that "Spill Numbers" are determined closed upon regulatory disposal of all wastes.

### **TELEPHONE NUMBERS**

**District Manager**

**TBA**

**Connecticut DEP  
Monro Corporate**

**Greg Peterson  
FAX**

**1-860-424-3338  
1-585-647-6400, Ext. 3283  
1-585-647-0947**



## MONRO MUFFLER SPILL REPORT FORM

Monro Store # \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_  
Manager \_\_\_\_\_

Person Reporting \_\_\_\_\_

Material Spilled/Released \_\_\_\_\_

Amount Spilled/Released \_\_\_\_\_

District Manager Notified \_\_\_\_\_

Spill Controlled \_\_\_\_\_

Cleanup Completed \_\_\_\_\_

Fire Department Notified \_\_\_\_\_

Maryland DEP Spill Number \_\_\_\_\_

Resources Affected \_\_\_\_\_

Materials Used \_\_\_\_\_

Conditions/Actions That Caused Spill \_\_\_\_\_

Comments/Concerns \_\_\_\_\_

Spill Report Form Emailed to [greg.peterson@monro.com](mailto:greg.peterson@monro.com)



## MONRO MUFFLER

### CORPORATE STORE PROCEDURE & SPILL RESPONSE PLAN

On \_\_\_\_\_, training was provided on the Monroe Muffler  
(date)

Spill Response Plan that has been adopted for stores in the State of Connecticut.

This training was

Conducted at \_\_\_\_\_ by \_\_\_\_\_.  
(location) (name)

My signature on this document verifies that I attended the training, and agree to comply with the conditions set forth.

Employee \_\_\_\_\_  
(print) (signature) (date)

District Manager \_\_\_\_\_  
(print) (signature)

**Original of this document is to be forwarded to Greg Peterson, Director of Facilities, with copies to be maintained at the store, by the District Manager, and a copy given to the employee.**