

## TOWN OF EAST LYME AQUIFER PROTECTION AGENCY

#### Received

AUG 28 2023

Town of East Lyme Land Use

# 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 REGIS	TRATION
Application No	
APA Name	
Facility Name	
Map / Lot	
Previous Registration / Pen	mit No.

#### **Registration Type**

Check the appropriate box identifying the registration type.

-	, , , , , , , , , , , , , , , , , , ,				
This application is for (check one):		application is for (check one):			
		A new registration for a facility			
	X	A renewal of an existing registration			
		A modification of an existing registration*			
		A registration for a vacant site**			
		A transfer of a registration			

#### **Applicant Information**

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

	Name of Company: Post Road Property	<b>F</b> SCC
	State: <u>CT</u> Zip Code: <u>06357</u>	
-739-5514ext.	Cell Phone: 860-625-1566	
Cadvanced-Pa	PowerFax:	
Applicant's interest in property or facility at which the proposed activity is to be located: (check all that apply)		
option holder	☐ lessee ☐ facility owner	
☐ operator	other (specify):	ı
	perty or facility at which  option holder	State: Zip Code:

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.

Engineer or other consultant			
Name of Company: // WINTHROP GROO	Name of Company: THE WINTHROP GROUPService Provided: SITE/DRAINAGE ENGINEER		
Contact Person: EDWARD H. WENE III PC Title: YRESIDENT			
Mailing Address: P.O. Box 359			
City/Town: No STONINGTON	State: <u>C7</u> Zip Code: <u>06359</u>		
Business Phone: 860-460-160 6 ext.	Cell Phone:		
E-mail address: <u>ewenke@Comcast.Net</u>	Fax: 860-495-5563		
Attorney or other representative			
	Service Provided:		
	Title:		
Mailing Address:			
	State: Zip Code:		
	Cell Phone:		
	Fax:		
Facility Information			
Facility			
Name: ADVANCED POWER ES	MIDMENT		
Street Address: 253 BOSTON POST RD	Assessor's Map / Lot: # 30.2/37		
Facility Owner			
Name: JOHN FERULA			
Contact Person: SAME	Title:		
Mailing Address: PO Box 704			
City/Town: WIANTIL	State: CT Zip Code: 06357		
Business Phone: <u>\$60-739-5579</u> ext.	Cell Phone: 860-625-1566		
E-mail address: JOHN @ ADVANCED-TOWN			
Facility Operator — Faulpment. Cor	7)		
Name: SAME			
	Title:		
Mailing Address:			
City/Town:	State: Zip Code:		
Business Phone: ext			
E-mail address:	Fax:		
Supporting Documents			
• • • • • • • • • • • • • • • • • • • •			
Please verify that <i>all</i> applicable attachments have been	submitted with this application form (check each box).		
☐ A Facility Boundary Map (required for all application	ns)		
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.			
- Stormstor management risking in requested by the rigorous.			

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

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

### **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 of the Aquifer Protection Area Regulations.	s materials shall take place in accordance with all provisions			
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 timplemented upon issuance of a registration				
Calle Coll	8/22/23			
Signature of Applicant	Date			
JOHN FERNICO	S/22/23 Date  OWNER  Title (if applicable)			
Name of Applicant (print ortype)	Title (ifapplicable)			
Signature of Operator (if different than above)	Date			
Name of Operator (print ortype)	Title (ifapplicable)			
Name of Operator (print of type)	тие (паррисаріе)			
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	I certify that this application is on complete and accurate forms as prescribed by the Agency without alteration of the text."			
	by the Agency without alteration of the text."			
Lo by Ver Me	by the Agency without alteration of the text."			
Signature of Applicant	by the Agency without alteration of the text."  8/22/23  Date			
Signature of Applicant To a Control of Applicant	8/22/23			
JOHN FERRILO	8/22/23 Date			
Signature of Applicant  Name of Applicant (print ortype)	8/22/23			
JOHN FERRILO	8/22/23 Date			