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):

- [x] 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

Received

SEP 25 2023

Town of East Lyme
Land Use

* 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: Basim Dahdal Name of Company: Niantic Star LLC

Mailing Address: 263 Flanders Road

City/Town: Niantic State: CT Zip Code: 06357

Business Phone: 860-451-8188 ext. _____ Cell Phone: 203-521-9693 Best Way

E-mail address: maherdahdal@yahoo.com Fax: _____

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

- [ ] site owner
- [ ] option holder
- [x] lessee
- [ ] facility owner
- [ ] easement holder
- [ ] operator
- [ ] other (specify): _____

Engineer or other consultant

Name of Company: _____ Service Provided: _____
Contact Person: _____ Title: _____
Mailing Address: _____
City/Town: _____ State: _____ Zip Code: _____
Business Phone: _____ ext. _____ Cell Phone: _____
E-mail address: _____ Fax: _____

Attorney or other representative

Name of Firm: _____ Service Provided: _____
Contact Person: _____ Title: _____
Mailing Address: _____
City/Town: _____ State: _____ Zip Code: _____
Business Phone: _____ ext. _____ Cell Phone: _____
E-mail address: _____ Fax: _____

Facility Information

Facility

Name: Niantic Star LLC
Street Address: 263 Flanders Road, Niantic, CT 06357 Assessor's Map / Lot: _____

Facility Owner

Name: Basem Dahdal
Contact Person: _____ Title: Owner
Mailing Address: 263 Flanders Road
City/Town: Niantic State: CT Zip Code: 06357
Business Phone: 860-451-8188 ext. _____ Cell Phone: _____
E-mail address: maherdahdal@yahoo.com Fax: _____

Facility Operator

Name: Maher Dahdal
Contact Person: _____ Title: Operator
Mailing Address: 263 Flanders Road
City/Town: Niantic State: CT Zip Code: 06357
Business Phone: 860-451-8188 ext. _____ Cell Phone: 203-521-9693
E-mail address: maherdahdal@yahoo.com Fax: _____

Supporting Documents

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.*

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]	9/25/23
Signature of Applicant	Date
Basem Dahdal	Owner
Name of Applicant (print or type)	Title (if applicable)
[signature]	9/25/23
Signature of Operator (if different than above)	Date
MAHER DAHDAL	Manager
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]	9/25/23
Signature of Applicant	Date
Basem Dahdal	Owner
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)

Activity Information

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	☑
On-site storage of hazardous materials for the purpose of wholesale sale	☐
Repair / maintenance of vehicles or internal combustion engines of vehicles	☐
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 stripping operations	☐
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	☐

flanders

Search Results

Parcel Details

Return To Search Results

263 FLANDERS RD

NRPP LLC

263 FLANDERS RD
NIANTIC, CT 6357

Parcel ID: 26.1 10-1
Lot Size: 0.542 AC
Assessed Value: 724780

Links
- Parcel Details
- Photo
- Google Map

Abutters
- Bing Bird's Eye
- Property Map
- Abutter Distance:

Adjacent
- Adjacent
- 50 ft
- 100 ft
- 200 ft
- 300 ft
- 400 ft
- 500 ft
- 1000 ft

Find Abutters
Clear Abutters

Add Parcel
Remove Parcel
Print Labels
Export List

Parcel ID 26.1 10-1
Address 263 FLANDE
MapNumber 26.1
Lot 10-1
Size 0.542 AC
AVPID 5404

About
Layers
Identify

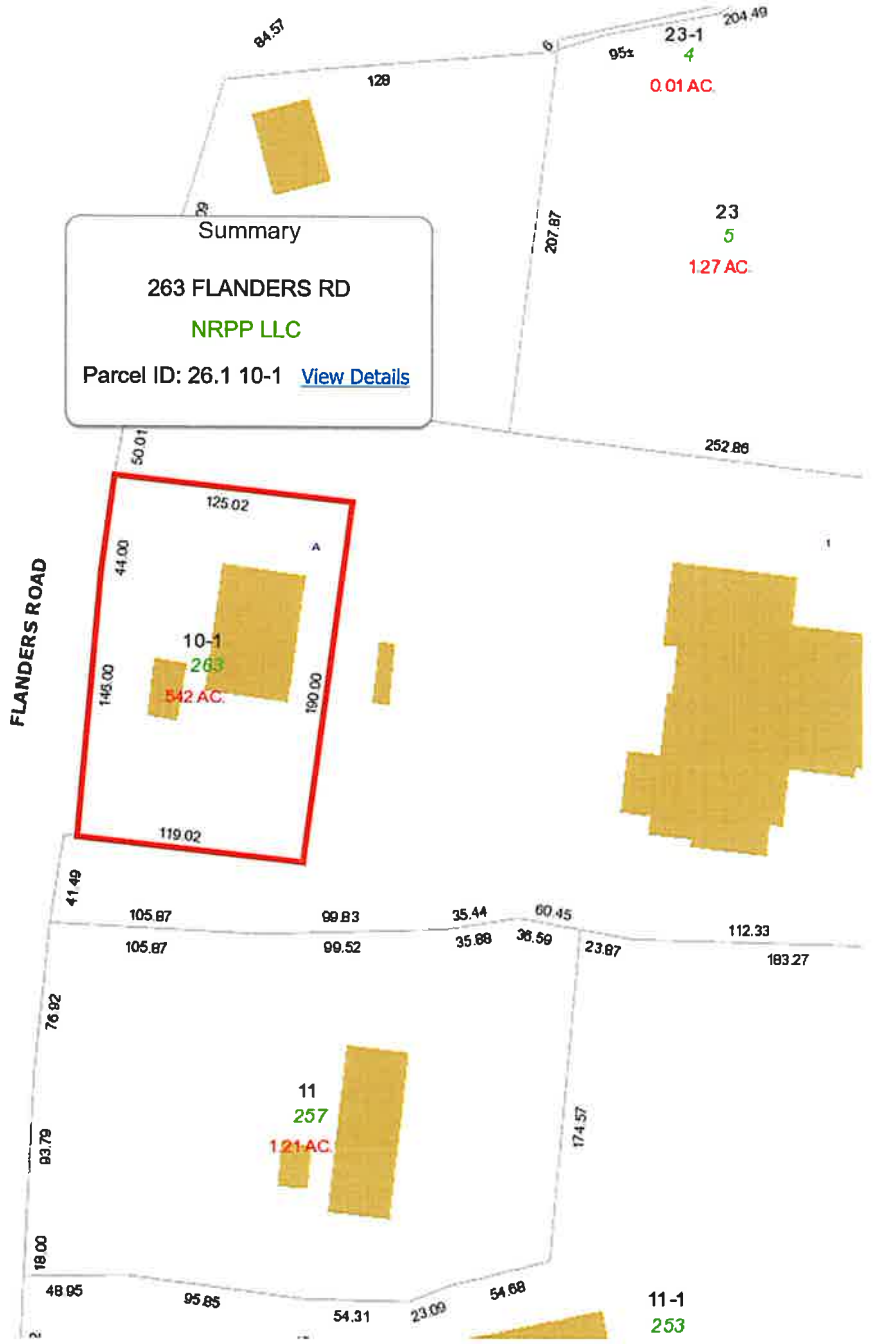
I-95 Exit 73 North Off Ramp

Summary

263 FLANDERS RD

NRPP LLC

Parcel ID: 26.1 10-1 View Details



Email Map Link

Copy and paste the following string into an email to link to the current map view:

lat:41.3597, long:-72.2073

20m
100ft

Close

TaxMapBond


INSTRUCTIONS


EMERGENCY
SHUT-OFF
SWITCH

INVOICE

Renaissance Alliance Insurance Services, LLC
2 Park Central Drive, Suite 300 • Southborough, MA 01772 • 800-514-2667

Client	NRPP, LLC
	92144
Date	08/26/2022
	The Reardon Agency
Page	1 of 1

Your Agent

NRPP, LLC
252 Whistletown Road
East Lyme, CT 06333

Payment Due Upon Receipt To Ensure Continuous Coverage

Amount Due	$ 1,233.44
Amount Paid	

Invoice#296106

CST2019543-16

Please detach and return this portion with your payment

Make checks payable to: RAIS

Customer: NRPP, LLC

INVOICE #	EFFECTIVE DATE	TRANSACTION TYPE	DESCRIPTION	AMOUNT
			Policy #CST2019543-16 09/27/2022-09/27/2023 Nautilus Insurance Company	
296106	09/27/2022	Renew policy	Pollution - Renew policy	1,186.00
			Surplus Lines Tax - Renew policy	47.44

Broker Copy

If you have already paid your Agent or RAIS, please keep this invoice for your records
FOR ONLINE PAYMENT PLEASE VISIT: renaissanceins.epaypolicy.com

TOTAL
$ 1,233.44

Thank you!