

## Public Water Supply Watershed or Aquifer Area Project Notification Form

### REQUIREMENT:

Within seven days of filing, all applicants before a municipal Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for any project located within a public water supply aquifer or watershed area are required by Public Act No. 06-53 of the CT General Statutes to notify The Commissioner of Public Health and the project area Water Company of the proposed project by providing the following information.

To determine if your project falls within a public water supply aquifer or watershed area visit the appropriate town hall and look at their *Public Drinking Water Source Protection Areas* map. If your project falls completely within or contain any part of a public water supply aquifer or watershed you are required to complete the following information.

Note: You will need information obtained from the *Public Drinking Water Source Protection Areas* map located in the appropriate town hall to complete this form.

**Step 1:** Have you already notified The CT Department of Public Health (CTDPH) of this project? No ☐ **Complete Steps 2 - 6**

Yes, I have notified DPH under a different project name ☐

OR I have notified DPH under the same name but in the year \_\_\_\_\_. **Complete Steps 4 - 6.**

### Step 2:

1. Name of public water supply aquifer your project lies within \_\_\_\_\_.
2. Name of public water supply watershed your project lies within \_\_\_\_\_.
3. Public Water Supply Identification number (PWSID) for the water utility that manages the watershed or well(s):  
CT \_\_\_\_\_.
4. Project Town \_\_\_\_\_.

### Steps 3: For 1-5 check all that apply

1. My project is proposing:
  - ☐ Industrial (factory)
  - ☐ Commercial (business)
  - ☐ Agricultural (farm, field, nursery)
  - ☐ Residential (housing – single or multiple family)
  - ☐ Recreational (trail, ball field, complex)
  - ☐ Transportation improvements (road widening or relocation, parking lot expansion)
  - ☐ Institutional (school, hospital, nursing home etc)
  - ☐ Quarry/Mining
  - ☐ Zone Change, please describe \_\_\_\_\_.
  - ☐ Other, please describe \_\_\_\_\_.
2. The total acreage of my project site parcel is:
  - ☐ 5 acres or less
  - ☐ Greater than 5 acres
3. My project site contains, abuts or is within 50 feet of a:
  - ☐ Wetland(s)
  - ☐ Stream
  - ☐ River
  - ☐ Pond or lake

4. Existing use of my project site is:

- ☐ Grassland/meadow;  
☐ Forested;  
☐ Agricultural;  
☐ Transportation  
☐ Institutional (school, hospital, nursing home etc)  
☐ Residential; ☐ Quarry/Mining  
☐ Commercial; ☐ Recreational  
☐ Industrial.  
☐ Other, please describe \_\_\_\_\_

5. My project will utilize (check all that apply):

- ☐ septic system  
☐ existing public sewer ☐ new public sewer  
☐ existing private well ☐ new private well  
☐ existing public water supply ☐ agricultural waste facility  
☐ new public water supply and I have ☐ applied for / ☐ did not apply for a *certificate of public convenience and necessity* from DPH

6. My project will contain this percentage of built up area (buildings, parking, road/driveway, pool):

- ☐ 10% or less  
☐ 20% to 40%  
☐ 50% or more

**Step 4: Applicants Contact Information:**

- a) Name \_\_\_\_\_  
b) Email address \_\_\_\_\_  
c) telephone and/or cell phone number \_\_\_\_\_  
d) fax number \_\_\_\_\_

**Step 5: Provide the following project information if available:**

- a) Project name \_\_\_\_\_  
b) Project site street address \_\_\_\_\_  
c) Project site nearest intersection \_\_\_\_\_  
d) Project site latitude and longitude \_\_\_\_\_

**Step 6: SUBMIT FORM**