PUBLIC WATER SUPPLY PROJECT NOTIFICATION REQUIREMENTS

Effective October 1, 2006, applications for any project located within a public water supply aquifer protection area or watershed area before the Planning and Zoning Commission, the Zoning Board of Appeals, or the Inland Wetlands Agency must notify the Commissioner of the CT Department of Public Health (CTDPH). *Notification must be made within 7 days of the submission of the application.*

To determine if your project is in such an area, please contact the Manchester Planning Department at 860-647-3044.

If your project falls within one of these areas, please fill out the **Watershed or Aquifer Area Project Notification Form** available at the CTDPH website here: https://portal.ct.gov/-/media/Departments-and-

<u>Agencies/DPH/dph/drinking_water/pdf/WatershedorAquiferAreaProjectNotificationFormpdf.pdf.</u> If you have questions about the form, contact the CTDPH Drinking Water Section at (860) 509-7333. You will need the following information to complete the form:

Aquifer Protection Areas: New State Road

Love Lane

Charter Oak Street

Public Water Supply Watershed: Globe Hollow Reservoir*

Lydall Reservoir No. 2* New Bolton Road* Porter Reservoir* Howard Reservoir

Public Water Supply Identification Number (PWSID) for all areas is CT 0770021.

*Public Water Supply Watershed & Aquifer Protection Areas

Email the completed form to dph.swpmail@ct.gov (make sure to cc: kwilliford@manchesterct.gov so the Planning Department can confirm that your form was submitted). A copy of the form will be placed in the application file.

If you do not have internet access, please complete the attached form and mail one (1) copy to each of the following addresses:

CT Department of Health
410 Capitol Ave
Lincoln Center, 2nd Floor
MS #51 WAT
494 Main Street, P.O Box 191
Hartford, CT 06134
Manchester, CT 06045-0191

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 reguired 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, Go to Step 2
Yes, I have notified DPH under a different project name - Complete steps 4-6
Yes, same name different year - Notification Year Complete steps 4-6
Step 2:
Name of public water supply aquifer your project lies within:
2. Name of the public water supply watershed your project lies within:
3. Public Water Supply Identification number (PWSID) for the water utility:
Step 3: For 1-5 Check all that apply
1. My project is proposing:
Industrial use; Commercial use; Agricultural use; Residential use;
Recreational use; Transportation improvements; Institutional (school, hospital, nursing home, etc.)
Quarry/Mining; Zone Change, Please Describe:
Other, Please describe:
2. The total acreage of my project is:
Less than or equal to 5 acres Greater than 5 acres
3. My project site contains, abuts or is within 50 feet of a:
Wetland; 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; Commercial; Recreational; Quarry/Mining
Other Please Describe:
5. My project will utilize:
septic system; existing public sewer; new public sewer; agricultural waste facility;
existing private well; new private well; existing public water supply;
new public water supply, if new have you applied for a certificate of public convenience and necessity from DPH? Yes No
6. My project will contain this percentage of built up area (buildings, parking, road/driveway, pool): Less than or equal to 20% Greater than 20% to 50% Greater than 50%
Step: 4 Applicants Contact Information:
Name:
E-mail address:
Telephone:
Fax number:
Step 5: Please provide the following if available:
Project name:
Project site address:
Town:
Project site nearest intersection:

E-mail completed form to dph.swpmail@ct.gov