

Drinking Water & Groundwater Protection Division - Permit Application Wastewater System & Potable Water Supply



For Office Use Only:

Application# WW-138-1215	PIN#	Date Complete Application Received
------------------------------------	------	------------------------------------

Authority:
10 V.S.A. Chapter 64, the Environmental Protection Rules, Chapter 1, Wastewater System & Potable Water Supply Rules, and Chapter 21, Water Supply Rules, Appendix A. Part 11 - Small Scale Water Systems.

General Information:
The organization and/or content of this form may not be altered, however, the form is designed to expand to allow additional information to be entered. Changes in the organization and/or content of the form may result in an invalid application or permit.
In most cases a licensed designer will be required for your project and to help complete this application form. There are also line-by-line instructions available to assist with completing this form.

NOTE: We strongly suggest referring to the application instructions while completing this application form.

Part I Applicant (Landowner) & Project Contact Information

Section A - Applicant Details (if Landowner is an Individual or Individuals)

1 Last Name Cable		2 First Name (and Middle Initial if appropriate) Davis and Elizabeth	
3 Mailing Address Line 1 1200 Belgrave Place		4 Mailing Address Line 2	
5 Town/City Charlotte	6 State/Province NC	7 Country United States	8 Zip/Postal Code 28203
9 Email Address dcable@springsidepartners.com		10 Telephone 704-577-2004	

Remove This Applicant

1 Last Name Slater		2 First Name (and Middle Initial if appropriate) Pat and Caroline	
3 Mailing Address Line 1 127 Prindle Road		4 Mailing Address Line 2	
5 Town/City Charlotte	6 State/Province VT	7 Country United States	8 Zip/Postal Code 05446
9 Email Address Patrick.Slater@EverBank.com		10 Telephone 802-425-3852	

Remove This Applicant

Add Another Applicant

Section B - Applicant Details (if Landowner is other than an Individual or Individuals, e.g. Corporations, Homeowner's Associations, etc.)

1 Registered Legal Entity or Organization Name		2 Telephone	
3 Mailing Address Line 1		4 Mailing Address Line 2	
5 Town/City	6 State/Province	7 Country United States	8 Zip/Postal Code

Certifying Official The Certifying Official must be a person who has signatory authority for the legal entity or organization that is the Applicant. A copy of the document authorizing this person to act as a signatory authority must be attached to this application.	
9 Certifying Official Last Name	10 Certifying Official First Name (and MI if appropriate)
<input type="text"/>	<input type="text"/>
11 Certifying Official Title	
<input type="text"/>	
12 Certifying Official Email Address	13 Telephone
<input type="text"/>	<input type="text"/>
<input type="button" value="Remove This Applicant"/>	

Section C - Primary Contact Information (if other than Applicant)			
1 Last Name		2 First Name (and Middle Initial if appropriate)	
<input type="text"/>		<input type="text"/>	
3 Mailing Address Line 1		4 Mailing Address Line 2	
<input type="text"/>		<input type="text"/>	
5 Town/City	6 State/Province	7 Country	8 Zip/Postal Code
<input type="text"/>	<input type="text"/>	United States	<input type="text"/>
9 Email Address			10 Telephone
<input type="text"/>			<input type="text"/>

Section D - Building/Business Owner Information			
1 Last Name		2 First Name (and Middle Initial if appropriate)	
<input type="text"/>		<input type="text"/>	
3 Mailing Address Line 1		4 Mailing Address Line 2	
<input type="text"/>		<input type="text"/>	
5 Town/City	6 State/Province	7 Country	8 Zip/Postal Code
<input type="text"/>	<input type="text"/>	United States	<input type="text"/>
9 Email Address			10 Telephone
<input type="text"/>			<input type="text"/>

Part II Certifying Designer(s) Information			
1 Designer Last Name		2 Designer First Name (and Middle Initial if appropriate)	
Courcelle		Martin	
3 Designer License#	4 Company Name		
8745	Champlain Consulting Engineers		
5 Mailing Address Line 1		6 Mailing Address Line 2	
85 Prim Road		P.O. Box 85	
7 Town/City	8 State/Province	9 Country	10 Zip/Postal Code
Colchester	VT	United States	05446
11 Email Address			12 Telephone
mcourcelle@champlainconsulting.net			802-863-8060

13 Designer Role(s) (check all that apply)

Water Supply Designer

Wastewater Disposal System Designer

Remove This Designer

Add Another Designer

Part III Property Location Information

Section A - Property Location

1 Please provide the property Town and the property address or a brief description of the location.

(a) Town or City	(b) Street or Road Location
Charlotte	127 Prindle Road

Section B - Center of Property GPS Coordinates

1 Enter the approximate center of property coordinates using GPS set for NAD83 or as derived from a map (map must be based on NAD83).

(a) Latitude <i>(in decimal degrees to five decimal places, ex. 44.38181°)</i>	(b) Longitude <i>(in decimal degrees to five decimal places, ex. -72.31392 °)</i>
N <input type="text" value="44.30378"/> °	W (-) <input type="text" value="73.18386"/> °

Part IV Project Information

Section A - General Project Information & Questions

1 Project Name (if applicable)	2 Total Acreage of Property
Bahrenburg PRD	24.27

3 Business Name (if applicable)

4 Detailed Project Description

Eliminate the replacement area designation and associated easement for lots #1 and #2 of the Bahrenburg PRD in Charlotte, VT.

5 (a) Were all existing buildings or structures, campgrounds, and their associated potable water supplies and wastewater systems substantially completed before January 1, 2007? Yes No

(b) Were all existing improved and unimproved lots in existence before January 1, 2007? Yes No

6 Does this application include subdividing the property? Yes No

7 Has anyone from the Drinking Water & Groundwater Protection Division's Regional Office been to the property?..... Yes No

If Yes, enter the staff person's name and the date of the visit.

(a) Name of Staff Person	(b) Date of Visit (m/d/yyyy)
Ernest Christianson	7/20/2004

8 Will any construction occur within 50 feet of a wetland boundary, mapped or designated? Yes No

If Yes, contact the Wetlands Program of the Watershed Management Division at (802) 338-4835.

9 Will more than one acre be disturbed during the entire course of construction, including all lots and phases? Yes No

If Yes, contact the Stormwater Program of the Watershed Management Division at (802) 241-4320.

10 Will there be any stream crossings by roads, utilities, or other construction? Yes No

If Yes, contact the River Corridor Mgmt. Program of the Watershed Management Division at:

Central & Northwest Vermont (802) 879-5631
 Southern Vermont (802) 786-5906
 Northeastern Vermont (802) 751-0129

11 Is the project located in a special flood hazard area as designated on the flood insurance maps prepared for a municipality by the Federal Emergency Management Agency? Yes No

If Yes, show the special flood hazard area limits on the site plan.

12 Act 250: Has the Applicant (Landowner) subdivided any other lots of any size within a five mile radius of this subdivision, or within the environmental district within the last five years? Yes No

If Yes, enter the town(s) and the associated number of lots in the table below:

	(a) Town	(b) Number of Lots
X		

13 Is there any prior Act 250 jurisdiction on the tract of land? Yes No

If Yes, enter the Act 250 permit number:

(a) Act 250 Permit Number

Section B - Project Deed Reference

1 Please provide the Town, Parcel ID, Book, and Page reference for the current landowner's deed(s) to this property:

	(a) Town	(b) Parcel ID	(c) Book	(d) Page(s)
X	Charlotte	00020-0127	165	295
X	Charlotte	00020-0151	165	297-298

Section C - Project Plan Reference

1 Please provide the following information for all water supply and wastewater disposal system plans being submitted.

	(a) Sheet#	(b) Title	(c) Plan Date	(d) Plan Revision Date
X	C-2	Overall Site Plan	6/20/2005	6/15/2006

Section D - Existing Project Lot/Building Details

Please provide the existing project details. This section is used to describe what is existing for the project. For example, if you are subdividing an undeveloped 21-acre parcel, you would list the existing parcel. If you are revising the boundary lines of two commercial lots in an industrial park, and constructing an addition to an existing building you would list the existing lot numbers, existing acres, existing buildings, existing uses, construction date(s), prior permits, and answer the compliance questions.

1 Lot#	2 Lot Size (acres)	3 Existing Use of the Lot
1	7.12	5-Bedroom Home

4 Provide the following information for each building on the lot:

(a) Building ID	(b) Existing Use	(c) Date Construction of Building Substantially Complete	(d) Prior Permits	(e) In compliance with existing permits?
X 1	Residential	01-01-2009	WW-4-2524-1	<input checked="" type="radio"/> Yes <input type="radio"/> No

1 Lot# 2	2 Lot Size (acres) 17.15	3 Existing Use of the Lot Undeveloped-Approved for 5-bdrm SFR			
4 Provide the following information for each building on the lot:					
X	(a) Building ID	(b) Existing Use	(c) Date Construction of Building Substantially Complete	(d) Prior Permits	(e) In compliance with existing permits? <input type="radio"/> Yes <input type="radio"/> No
<input type="button" value="Add Another Building"/>					
<input type="button" value="Remove This Lot"/>					
<input type="button" value="Add Another Lot"/>					

Section E - Proposed Project Lot/Building Details

This section is used to describe what you are proposing to do in this project. For example, if you were going to create 4 lots for construction of single family residences, you would list each lot, proposed acreage, proposed buildings, and proposed use.

1 Lot#	2 Lot Size (acres)	3 Proposed Use of the Lot

4 Is the lot being created as part of a subdivision? Yes No

5 Are you requesting that the Blood, Marriage, or Civil Union special fee be applied to this lot? Yes No

6 If the lot is exempt, please indicate the specific exemption from the Wastewater System and Potable Water Supply Rules?

7 Provide the following information for each building on the lot:

X	(a) Building ID	(b) If building is exempt, indicate exemption	(c) Construction or increased flow?	(d) Proposed Use
			<input type="checkbox"/>	

Part V Water Supply Information

Section A - Water Supply Screening Questions

1 Are you proposing a new water supply or water service line or changes to a permitted but not constructed water supply or water service line for this project? Yes No

2 Are you proposing changes to an existing water supply or water service for this project (including changes to location, design flows, or operational change)? Yes No

3 Is there an existing connection to a water supply or water service line for this project? Yes No

Complete Part V if you answered Yes to any of the above questions. A project with no existing or proposed water supply may skip to Part VI.

Section B - General Water Supply Questions

1 Does this project involve a failed water supply? Yes No

2 Will any of the proposed water sources serve 25 or more people or have 15 or more service connections? Yes No

If Yes, the applicant must contact the Drinking Water & Groundwater Protection Division at (802) 241-3400 for source, construction and an operating permit.

3 Are any of the existing or proposed water sources located within a special flood hazard area? Yes No

4 Are any of the existing or proposed water sources located within a floodway? Yes No

5 Are any of the proposed water sources located within 1 mile of a hazardous waste site as designated by the Waste Management Division and identified on the Agency mapping website? Yes No
If Yes, please submit additional information on the site. The Waste Management Division can be reached at (802) 241-3888.

6 Does this project require an approval letter from the Drinking Water & Groundwater Protection Division for the construction of a public water system, municipal water line extension over 500 feet, or hydrants or sprinkler systems? Yes No
If Yes, please submit a copy of the approval letter from the Drinking Water & Groundwater Protection Division.

7 Does the proposed or existing water supply(ies) use a water treatment device to obtain compliance with the quality requirements in the Water Supply Rule? Yes No
If Yes, please submit additional information regarding the constituent(s) that exceeds the standards and plans, details, and specifications of the treatment device.

8 Is any portion of the proposed water supply located in or near a Water Source Protection Area as designated by the Drinking Water & Groundwater Protection Division? Yes No
If in areas of known interference issues, contact the Drinking Water & Groundwater Protection Division at (802) 241-3400.

Section C - Individual Water Supply Details

Please provide the following information for each of the existing and proposed water supply(ies) serving a building or structure, or campground on the property.

1 Water Supply Name/Identifier Existing Lot 1 Well	2 Water Supply Owner (if not Applicant)
3 Water Source Type Non-Public Drilled Bedrock Well	4 Type of Change to Supply No Change

5 Lots/Buildings Served by this Water Supply System

	(a) Lot#	(b) Building ID	(c) Type of Change to the Building's Supply	Design Flows (Gallons Per Day)			(g) Rule or Meter Based Flows
				(d) Existing	(e) Change	(f) Total	
X	1	1	No Change	675	0	675	Rule-based
Add Another Lot/Building Served by this Supply				6	7	8	
				675	0	675	

9 Is this water supply located off-lot? Yes No

10 Is this water supply shared? Yes No
If the water supply is located off-lot or shared, submit a copy of the agreement to provide an easement prior to construction.

11 Is a variance being requested for this water supply? Yes No
If Yes, please submit additional details related to the variance request.

Remove This Water Supply

1 Water Supply Name/Identifier Proposed Lot 2 Well	2 Water Supply Owner (if not Applicant)
3 Water Source Type Non-Public Drilled Bedrock Well	4 Type of Change to Supply No Change

5 Lots/Buildings Served by this Water Supply System

	(a) Lot#	(b) Building ID	(c) Type of Change to the Building's Supply	Design Flows (Gallons Per Day)			(g) Rule or Meter Based Flows
				(d) Existing	(e) Change	(f) Total	
X	2	1	No Change	675	0	675	Rule-based

Add Another Lot/Building Served by this Supply

6	7	8
675	0	675

9 Is this water supply located off-lot? Yes No

10 Is this water supply shared? Yes No

If the water supply is located off-lot or shared, submit a copy of the agreement to provide an easement prior to construction.

11 Is a variance being requested for this water supply? Yes No

If Yes, please submit additional details related to the variance request.

Remove This Water Supply

Add Another Water Supply

Section D - Water Supply Design Flows Summary Table

1 If the project includes more than one water supply, please list each water supply system and provide the total water supply design flows for the project. **IMPORTANT:** Please don't include systems that were identified in this Part on Section C, Line 4 as a "Replacement Area Designation" in this summary table.

		Design Flows (Gallons Per Day)		
(a) Water Supply Name/Identifier		(b) Existing	(c) Change	(d) Total
X	Existing Lot 1 Well	675	0	675
X	Proposed Lot 2 Well	675	0	675
Add Another Water Supply		2	3	4
		1,350	0	1,350

Part VI Wastewater Disposal System Information

Section A - Wastewater Disposal System Screening Questions

1 Are you proposing a new or replacement wastewater disposal system, a new wastewater service line, or changes to a permitted but not constructed wastewater disposal system or wastewater service line for this project? Yes No

2 Are you proposing changes to an existing wastewater disposal system, replacement wastewater disposal system, replacement area, or wastewater service line for this project (including changes to location, design flows, or operational change)? Yes No

3 Is there an existing connection to a wastewater disposal system or wastewater service line for this project?..... Yes No

*Complete Part VI if you answered Yes to any of the above questions.
A project with no existing or proposed wastewater disposal systems may skip to Part VII.*

Section B - General Wastewater Disposal System Questions

1 Does this project involve a failed wastewater disposal system? Yes No

2 Do any of the systems require a curtain or dewatering drain as part of the design? Yes No

3 Is a hydrogeologic study required for this project? Yes No

4 For projects using soil-based wastewater systems having a total design flow that exceeds 1,000 gpd, is this project located in a Class A Watershed?..... Yes No NA

If Yes, indicate the Class A Watershed in which the system(s) is located:

(a) Class A Watershed Name

5 Are there any existing or proposed floor drains as part of this project?..... Yes No

If Yes, indicate where the floor drains will discharge:

(a) Floor Drain Discharge Point

6 If the project utilizes an Innovative/Alternative System or Product, has the applicant received a copy of the Drinking Water & Groundwater Protection Division's approval letter? Yes No NA

7 Is any portion of the proposed wastewater disposal system located in or near a Water Source Protection Area as designated by the Drinking Water & Groundwater Protection Division? Yes No

If Yes, contact the Drinking Water & Groundwater Protection Division at (802) 241-3400.

Section C - Individual Wastewater Disposal System Details

Please provide the following information for each of the existing and proposed wastewater disposal systems serving a building or structure, or campground on the property.

1 Wastewater Disposal System Name/Identifier <input type="text" value="Community Mound System"/>	2 Wastewater Disposal System Owner (if not Applicant) <input type="text"/>
3 Wastewater Disposal System Type <input type="text" value="Mound"/>	4 Type of Change to System <input type="text" value="Replacement Area Designation"/>

5 Lots/Buildings Served by this Wastewater Disposal System

	(a) Lot#	(b) Building ID	(c) Type of Change to the Building's System	Design Flows (Gallons Per Day)			(g) Total	(h) Rule or Meter Based Flows
				(d) Existing	(e) Change	(f) Infiltration		
X	1	1	Replacement Area Designation	1,120	0	0	1,120	Rule-based
X	2	1	Replacement Area Designation	1,120	0	0	1,120	Rule-based
Add Another Lot/Building Served by this System				6	7	8	9	
				2,240	0	0	2,240	

10 Is this wastewater disposal system located off-lot? Yes No

11 Is this wastewater disposal system shared? Yes No

If the wastewater disposal system is located off-lot or shared, submit a copy of the agreement to provide an easement prior to initiation of construction.

12 Is a variance being requested for this wastewater disposal system? Yes No

If Yes, please submit additional details related to the variance request.

13 If this wastewater disposal system type is a connection to an Indirect Discharge System, please provide the Indirect Discharge System ID number.

Indirect Discharge System ID Number

14 If this wastewater disposal system type is a connection to a municipal system, please select the town.

Town

15 If this wastewater disposal system is a soil-based system, please select the design approach used.

Design Approach Used

16 For soil-based systems, please check all that apply (Note: Store and dose does not apply to standard pump/pump chamber systems).

- Storage and Dose Filtrate Constructed Wetlands

17 If this is an Innovative/Alternative soil-based system, please select the system use type.

Innovative/Alternative System Use Type

General

18 If this is an Innovative/Alternative soil-based system, please select the Innovative/Alternative system or product.

Innovative/Alternative System or Product

Advantex Textile Filter

Remove This Wastewater System

Add Another Wastewater System

Section D - Wastewater Disposal Systems Design Flows Summary Table

1 If the project includes more than one wastewater disposal system, please list each system on this page and provide the total wastewater disposal design flows for the project. **IMPORTANT:** Please don't include systems that were identified in this Part on Section C, Line 4 as a "Replacement Area Designation" in this summary table.

		Design Flows (Gallons Per Day)			
(a) Wastewater Disposal System Name/Identifier	(b) Existing	(c) Change	(d) Infiltration	(e) Total	
X Community Mound System	1,120	0	0	1,120	
Add Another Wastewater System	2	3	4	5	
	1,120	0	0	1,120	

Part VII Application Fees

1 Fee Amount \$250.00

2 Fee Calculation Details

Per Tom Mansfield of Charlotte.

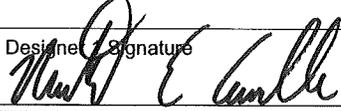
Part VIII Designer Certification & Copyright License

Section A - Certifying Designer 1 Certification & Copyright License

"I hereby certify that in the exercise of my reasonable professional judgment, the design-related information submitted with this application is true and correct, and that the design included in this application for a permit complies with the Vermont Wastewater System and Potable Water Supply Rules and the Vermont Water Supply Rules.

As the individual who prepared this application, including all documents that are marked as copyrighted, I hereby grant a non-exclusive, limited license to the State to allow the documents to be made available for public review and copying in order to properly implement and operate the permitting programs for Wastewater Systems and Potable Water Supplies, and for no other purposes. As a condition to this license, the State agrees that it will not make any changes to such documents, nor will the State delete any copyright notices on such documents."

- 1 Check the design(s) you are certifying. This should be the same as the Designer Role(s) you selected in Part II, Section A, Line 13.
- Water Supply Designer
 - Wastewater Disposal System Designer

1 Designer 1 Name Martin E. Courcelle, P.E.	2 Designer 1 Signature 	3 Signature Date 7/10/12
--	--	-----------------------------

Section B - Certifying Designer 2 Certification & Copyright License

"I hereby certify that in the exercise of my reasonable professional judgment, the design-related information submitted with this application is true and correct, and that the design included in this application for a permit complies with the Vermont Wastewater System and Potable Water Supply Rules and the Vermont Water Supply Rules.

As the individual who prepared this application, including all documents that are marked as copyrighted, I hereby grant a non-exclusive, limited license to the State to allow the documents to be made available for public review and copying in order to properly implement and operate the permitting programs for Wastewater Systems and Potable Water Supplies, and for no other purposes. As a condition to this license, the State agrees that it will not make any changes to such documents, nor will the State delete any copyright notices on such documents."

- 1 Check the design(s) you are certifying. This should be the same as the Designer Role(s) you selected in Part II, Section B, Line 13.
- Water Supply Designer
 - Wastewater Disposal System Designer

1 Designer 2 Name	2 Designer 2 Signature	3 Signature Date

Part IX Applicant(s) Signature & Acknowledgements

In order to insure compliance with the requirements of the regulations administered by the Department of Environmental Conservation, Drinking Water & Groundwater Protection Division, it may be necessary to visit the property. As this would involve a Department employee entering private property, we request your approval to do so.

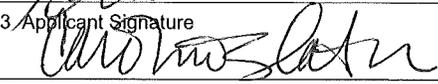
1 If we do visit your property, do you have any special instructions?

"As landowner of the property for which I am requesting a permit from the Department of Environmental Conservation, I understand that by signing this application I am granting permission for the Department employees to enter the property, during normal working hours, to insure compliance of the property with the applicable rules of the Department.

I also understand that I am not allowed to commence any site work or construction on this project without written approval from the Department of Environmental Conservation.

If my project utilizes an Innovative/Alternative System or Product, I have received a copy of the Drinking Water & Groundwater Protection Division's approval letter and agree to abide by the conditions of the approval.

I also certify that to the best of my knowledge and belief the information submitted above is true, accurate and complete."

<input checked="" type="checkbox"/>	2 Print Applicant Name Davis Cable	3 Applicant Signature	4 Signature Date
<input checked="" type="checkbox"/>	2 Print Applicant Name Elizabeth Cable	3 Applicant Signature	4 Signature Date
<input checked="" type="checkbox"/>	2 Print Applicant Name Pat Slater	3 Applicant Signature 	4 Signature Date 7/2/2012
<input checked="" type="checkbox"/>	2 Print Applicant Name Caroline Slater	3 Applicant Signature 	4 Signature Date 7/2/12

Add Applicant Signature Block

"As landowner of the property for which I am requesting a permit from the Department of Environmental Conservation, I understand that by signing this application I am granting permission for the Department employees to enter the property, during normal working hours, to insure compliance of the property with the applicable rules of the Department.

I also understand that I am not allowed to commence any site work or construction on this project without written approval from the Department of Environmental Conservation.

If my project utilizes an Innovative/Alternative System or Product, I have received a copy of the Drinking Water & Groundwater Protection Division's approval letter and agree to abide by the conditions of the approval.

I also certify that to the best of my knowledge and belief the information submitted above is true, accurate and complete."

<input checked="" type="checkbox"/>	2 Print Applicant Name Davis Cable	3 Applicant Signature <i>Davis Cable</i>	4 Signature Date <i>6/27/12</i>
<input checked="" type="checkbox"/>	2 Print Applicant Name Elizabeth Cable	3 Applicant Signature <i>Elizabeth P. Cable</i>	4 Signature Date <i>6-27-12</i>
<input checked="" type="checkbox"/>	2 Print Applicant Name Pat Slater	3 Applicant Signature	4 Signature Date
<input checked="" type="checkbox"/>	2 Print Applicant Name Caroline Slater	3 Applicant Signature	4 Signature Date

Add Applicant Signature Block