

# Wastewater Management Division - Permit Application Wastewater System & Potable Water Supply



**For Office Use Only:**

Application# <b>WW-13R-1009</b>	PIN#	Date Complete Application Received
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**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 Wood		2 First Name (and Middle Initial if appropriate) Nancy E.	
3 Mailing Address Line 1 152 Field's Farm Road		4 Mailing Address Line 2	
5 Town/City Charlotte	6 State/Province VT	7 Country United States	8 Zip/Postal Code 05445
9 Email Address NA			10 Telephone 425- 2761

Remove This Applicant

1 Last Name Thurber		2 First Name (and Middle Initial if appropriate) Andrew P.	
3 Mailing Address Line 1 2848 Green Bush Road		4 Mailing Address Line 2	
5 Town/City Charlotte	6 State/Province VT	7 Country United States	8 Zip/Postal Code 05445
9 Email Address NA			10 Telephone NA

Remove This Applicant

1 Last Name Thurber		2 First Name (and Middle Initial if appropriate) Emily D.	
3 Mailing Address Line 1 152 Field's Farm Road		4 Mailing Address Line 2	
5 Town/City Charlotte	6 State/Province VT	7 Country United States	8 Zip/Postal Code 05445
9 Email Address NA			10 Telephone 425- 2761

Remove This Applicant

1 Last Name Thurber		2 First Name (and Middle Initial if appropriate) Sarah B.	
3 Mailing Address Line 1 14130 Shaw Drive		4 Mailing Address Line 2	
5 Town/City Huntersville	6 State/Province NC	7 Country United States	8 Zip/Postal Code 28078
9 Email Address NA		10 Telephone NA	
Remove This Applicant			

Add Another Applicant

<b>Section B - Applicant Details (If Landowner is other than an Individual or Individuals, e.g. Corporations, Homeowner's Associations, etc.)</b>			
1 Registered Legal Entity or Organization Name Cedar Beach Trust		2 Telephone 425-2761	
3 Mailing Address Line 1 152 Field's Farm Road		4 Mailing Address Line 2	
5 Town/City Charlotte	6 State/Province VT	7 Country United States	8 Zip/Postal Code 05445

**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 Wood		10 Certifying Official First Name (and MI if appropriate) Nancy E.	
11 Certifying Official Title Co-Trustee			
12 Certifying Official Email Address nwood@gmavt.net		13 Telephone 425-2761	
Remove This Applicant			

Add Another Applicant

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

<b>Section D - Building/Business Owner Information</b>			
1 Last Name		2 First Name (and Middle Initial if appropriate)	
3 Mailing Address Line 1		4 Mailing Address Line 2	

5 Town/City	6 State/Province	7 Country	8 Zip/Postal Code
		United States	
9 Email Address			10 Telephone

**Part II Certifying Designer(s) Information**

1 Designer Last Name		2 Designer First Name (and Middle Initial if appropriate)	
Erwin		Elias	
3 Designer License#	4 Company Name		
00503	Lincoln Applied Geology		
5 Mailing Address Line 1		6 Mailing Address Line 2	
163 Revell Drive			
7 Town/City	8 State/Province	9 Country	10 Zip/Postal Code
Lincoln	Vermont	United States	05443
11 Email Address			12 Telephone
eerwin@lagvt.com			453-4384
13 Designer Role(s) (check all that apply)			
<input type="checkbox"/> Water Supply Designer <input checked="" type="checkbox"/> Wastewater Disposal System Designer			
<input type="button" value="Remove This Designer"/>			

**Part III Property Location Information**

**Section A - Property Parcel ID#(s) and Location(s)**

1 Please provide the property location information including Town or City Parcel ID#, Town/City, and Street or Road location in the table below:

	(a) Town/City Parcel ID#	(b) Town or City	(c) Street or Road Location
X	00056-0152	Charlotte	189 Field's Farm 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="44.29395"/> °	W (-) <input type="text" value="73.29409"/> °

**Part IV Project Information**

**Section A - General Project Information & Questions**

1 Project Name (if applicable)	2 Total Acreage of Property
Wood Property	16.25
3 Business Name (if applicable)	
4 Detailed Project Description	
A performance based mound-type replacement wastewater disposal system to serve a three BR residence and a one BR apartment. Existing 3 BR system is a failing in-ground absorption bed.	
5 Were all buildings or structures, campgrounds, and their associated potable water supplies and wastewater systems substantially completed before January 1, 2007 and all improved and unimproved lots in existence before January 1, 2007? .....	
<input checked="" type="radio"/> Yes <input type="radio"/> No	

6 Does this application include subdividing the property? .....	<input type="radio"/> Yes <input checked="" type="radio"/> No		
7 Has anyone from the Wastewater Management Division's Regional Office been to the property?.....	<input checked="" type="radio"/> Yes <input type="radio"/> No		
If Yes, enter the staff person's name and the date of the visit.			
(a) Name of Staff Person	(b) Date of Visit		
<input style="width:200px;" type="text" value="Spencer Harris"/>	<input style="width:100px;" type="text" value="03-15-2010"/>		
8 Will any construction occur within 50 feet of a wetland boundary, mapped or designated? .....	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If Yes, contact the Wetlands Program of the Water Quality Division at (802) 241-3770.			
9 Will more than one acre be disturbed during the entire course of construction, including all lots and phases? .....	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If Yes, contact the Stormwater Program of the Water Quality Division at (802) 241-4320.			
10 Will there be any stream crossings by roads, utilities, or other construction? .....	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If Yes, contact the River Corridor Mgmt. Program of the Water Quality 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? .....	<input type="radio"/> Yes <input checked="" type="radio"/> 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? .....	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If Yes, enter the town(s) and the associated number of lots in the table below:			
(a) Town	(b) Number of Lots		
<input checked="" type="checkbox"/> <input style="width:150px;" type="text"/>	<input style="width:50px;" type="text"/>		
<input type="button" value="Add Another Town/Lot"/>			
13 Is there any prior Act 250 jurisdiction on the tract of land?.....	<input type="radio"/> Yes <input checked="" type="radio"/> No		
If Yes, enter the Act 250 permit number:			
(a) Act 250 Permit Number	<input style="width:200px;" type="text"/>		
<b>Section B - Project Deed Reference</b>			
1 Please provide the Town, Book, and Page reference for the current landowner's deed(s) to this property in the table below:			
(a) Town	(b) Book	(c) Page(s)	
<input checked="" type="checkbox"/> Charlotte	<input style="width:50px;" type="text" value="121"/>	<input style="width:100px;" type="text" value="284-286"/>	
<input type="button" value="Add Another Deed Reference"/>			
<b>Section C - Project Plan Reference</b>			
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
<input checked="" type="checkbox"/> 1 of 2	Site Plan with Proposed Replacement Wastewater Disposal System Layout	<input style="width:80px;" type="text" value="04-30-2010"/>	<input style="width:80px;" type="text"/>
<input checked="" type="checkbox"/> 2 of 2	Proposed Wastewater System Design Details	<input style="width:80px;" type="text" value="04-30-2010"/>	<input style="width:80px;" type="text"/>
<input type="button" value="Add Another Plan Reference"/>			
<b>Section D - Existing Project Lot/BuildingDetails</b>			

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	16.25	3 BR SFR and 1 BR Apartment

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 - 3 BR SFR	Residential	01-01-1965	NA	<input type="radio"/> Yes <input checked="" type="radio"/> No
X	2 - 1 BR APRT	Residential	01-01-1965	NA	<input type="radio"/> Yes <input checked="" type="radio"/> No

Add Another Building

Remove This Lot

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
1	16.25	Replacement of Failed Wastewater Disposal System

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:

	(a) Building ID	(b) If building is exempt, indicate exemption	(c) Construction or increased flow?	(d) Proposed Use
X	1 - 3 BR SFR		<input type="checkbox"/>	Replacement of Failed Disposal System Using a Shared Mound
X	2 - 1 BR APRT		<input type="checkbox"/>	Replacement of Failed Disposal System Using a Shared Mound

Add Another Building

Remove This Lot

Add Another Lot

**Part V Water Supply Information**

**Section A - Water Supply Screening Questions**

1 Are you proposing a new water supply for this project?  Yes  No

2 Are you proposing changes to an existing water supply for this project?  Yes  No

3 Is there a connection to an existing water supply for the project?  Yes  No

*If you answered No to all three of the above questions, skip to Part VI. Otherwise, proceed with Part V.*

**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 Water Supply Division at (802) 241-3400 for source, construction and operating*

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 Water Supply 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 Water Supply 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 Water Supply Division? .....  Yes  No  
*If in areas of known interference issues, please contact the Water Supply 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 Lot 1 Bldg. 1 and 2 -Shared Drilled 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) Increase	(f) Total	
X	1	1 - 3 BR SFR	No Change	420	0	420	Rule-based
X	1	2 - 1 BR APRT	No Change	140	0	140	Rule-based
Add Another Lot/Building Served by this Supply				6	7	8	
				560	0	560	

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) Increase	(d) Total
X	Lot1 Bldg.1 - Shared Well	420	0	420
X	Lot 1 Bldg 2 - Shared Well	140	0	140
<b>Add Another Water Supply</b>		2 560	3 0	4 560

**Part VI Wastewater Disposal System Information**

**Section A - Wastewater Disposal System Screening Questions**

- 1 Are you proposing a new wastewater disposal system or replacement area for this project? .....  Yes  No
  - 2 Are you proposing changes to an existing wastewater disposal system for this project? .....  Yes  No
  - 3 Is there a connection to an existing wastewater disposal system for the project? .....  Yes  No
- If you answered No to all three of the above questions, skip to Part VII. Otherwise, proceed with Part VI.*

**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 If the project has a soil-based wastewater disposal system with design flows that exceed 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 Wastewater Management 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 Water Supply Division? .....  Yes  No  
 If Yes, contact the Water Supply 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 Lot 1 Bldg. 1 Existing System	2 Wastewater Disposal System Owner (if not Applicant) 
3 Wastewater Disposal System Type In-ground	4 Type of Change to System Replacement of Failed System

5 Lots/Buildings Served by this Wastewater Disposal System

		Design Flows (Gallons Per Day)					(h) Rule or Meter Based Flows
(a) Lot#	(b) Building ID	(c) Type of Change to the Building's System	(d) Existing	(e) Increase	(f) Infiltration	(g) Total	
X 1	1	Replacement of Failed System	420	0	0	420	Rule-based

**Add Another Lot/Building Served by this System**

6	7	8	9
420	0	0	420

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

Prescriptive

16 For soil-based systems, please check all that apply.

Storage and Dose     Filtrate

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

Innovative/Alternative System Use Type

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

Innovative/Alternative System or Product

**Remove This Wastewater System**

1 Wastewater Disposal System Name/Identifier <div style="border: 1px solid black; padding: 2px;">Lot 1 Bldg. 2 Existing System</div>	2 Wastewater Disposal System Owner (if not Applicant) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
3 Wastewater Disposal System Type <div style="border: 1px solid black; padding: 2px;">In-ground</div>	4 Type of Change to System <div style="border: 1px solid black; padding: 2px;">No Change</div>

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)			(h) Rule or Meter Based Flows
				(d) Existing	(e) Increase	(f) Infiltration	
X	1	2	No Change	140	0	0	140 Rule-based

**Add Another Lot/Building Served by this System**

6	7	8	9
140	0	0	140

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.  
 Storage and Dose     Filtrate

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

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

**Remove This Wastewater System**

1 Wastewater Disposal System Name/Identifier <input type="text" value="Lot 1 Bldg. 1 and 2- Shared Replacement"/>	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 of Failed System"/>

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)				(h) Rule or Meter Based Flows
				(d) Existing	(e) Increase	(f) Infiltration	(g) Total	
X	<input type="text" value="1"/>	<input type="text" value="1"/>	<input type="text" value="Replacement of Failed System"/>	<input type="text" value="420"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="420"/>	<input type="text" value="Rule-based"/>
X	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="No Change"/>	<input type="text" value="140"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="140"/>	<input type="text" value="Rule-based"/>
<b>Add Another Lot/Building Served by this System</b>				6 <input type="text" value="560"/>	7 <input type="text" value="0"/>	8 <input type="text" value="0"/>	9 <input type="text" value="560"/>	

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.  
 Storage and Dose     Filtrate

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

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

**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.

	(a) Wastewater Disposal System Name/Identifier	Design Flows (Gallons Per Day)			
		(b) Existing	(c) Increase	(d) Infiltration	(e) Total
X	Lot1 Bldg.1 Replacement System	420	0	0	420
X	Lot1 Bldg.2 Replacement System	140	0	0	140
<input type="button" value="Add Another Wastewater System"/>		2	3	4	5
		560	0	0	560

**Part VII Application Fees**

1 Fee Amount

2 Fee Calculation Details

**Part IX Applicant(s) Signature & Acknowledgements**

In order to insure compliance with the requirements of the regulations administered by the Department of Environmental Conservation, Wastewater Management 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 Wastewater Management 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 Nancy E. Wood, Co-Trustee	3 Applicant Signature <i>Nancy E. Wood</i>	4 Signature Date 5-9-10
<input checked="" type="checkbox"/>	2 Print Applicant Name Andrew P. Thurber	3 Applicant Signature <i>Andrew Thurber</i>	4 Signature Date 5/9/10
<input checked="" type="checkbox"/>	2 Print Applicant Name Emily D. Thurber	3 Applicant Signature <i>Emily Thurber</i>	4 Signature Date 5-9-10
<input checked="" type="checkbox"/>	2 Print Applicant Name Sarah B. Thurber	3 Applicant Signature <i>- See Attached -</i>	4 Signature Date

Add Applicant Signature Block

**Part IX Applicant(s) Signature & Acknowledgements**

In order to insure compliance with the requirements of the regulations administered by the Department of Environmental Conservation, Wastewater Management 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.

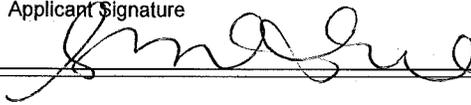
1 If we do visit your property, do you have any special instructions?

"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.

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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 Nancy E. Wood, Co-Trustee	3 Applicant Signature	4 Signature Date
<input checked="" type="checkbox"/>	2 Print Applicant Name Andrew P. Thurber	3 Applicant Signature	4 Signature Date
<input checked="" type="checkbox"/>	2 Print Applicant Name Emily D. Thurber	3 Applicant Signature	4 Signature Date
<input checked="" type="checkbox"/>	2 Print Applicant Name Sarah B. Thurber	3 Applicant Signature 	4 Signature Date 5/11/10

Add Applicant Signature Block