

**STATE OF VERMONT
 AGENCY OF NATURAL RESOURCES
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DRINKING WATER AND GROUNDWATER PROTECTION DIVISION
 10 V.S.A. Chapter 47 Permit Application Form WR-82**

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|---|---|--|
| Application For: (Check <input type="checkbox"/> one) <input type="checkbox"/> Indirect Discharge Permit (*) Only for a new application for indirect discharge of sewage | with Schedule: I (*) | Action Requested: (Check <input type="checkbox"/> one) <input type="checkbox"/> Original Permit <input type="checkbox"/> Renewal * <input type="checkbox"/> Amendment * <input type="checkbox"/> Transfer * <div style="text-align: right;">* Permit #</div> |
| Status of Discharge: (Check <input type="checkbox"/> one) <input type="checkbox"/> Proposed <input type="checkbox"/> Existing | Nature of Waste: (Check <input type="checkbox"/> one) <input type="checkbox"/> Sanitary (domestic sewage only) <input type="checkbox"/> Non-Sewage | |
| For DEC Use: PIN _____ Reviewer: _____ Check #: _____ Title 3: Y N | | |

1. Applicant:

- Legal Entity:
 (Individual, corporation, partnership, firm, state agency, municipality, etc.)

2. Mailing Address:

3. Contact:
 Telephone: Fax:
 E-Mail Address:

4. Name of Activity:
 (John Doe residence, SYZ Corp., Clark Lake State Park, Green Motel, etc.)

5. Type of Activity:
 (Residential subdivision, paper mill, state park, motel, etc.)

6. Description of Waste:

7. Name of Landowner:

8. Location: Town:

9. If this application is for a permit renewal, is the previous application still valid in all respects? Yes
 No If no, document changes on a separate attachment.

(OVER)

10. **Receiving Water for Indirect Discharges:** _____

11. **Compliance Review:** If this application is for a permit renewal, have you, the applicant, complied with all the permit conditions for the previous 5-year period, including performing all the necessary repair and maintenance items? Yes No If no, document on a separate attachment which permit conditions have not been complied with and why.

12. 3 V.S.A. Section 2822 Fees: payable to State of Vermont.
Call 802-477-3312 for assistance calculating the application review fee.

| | | |
|---|--|---|
| \$240.00 Administrative Processing Fee | | |
| Plus Application Review Fee | | Does not apply to renewal applications |
| Total Fee Enclosed | | Payment by check or money order, please |

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE INFORMATION SUBMITTED ABOVE IS TRUE, ACCURATE AND COMPLETE. I RECOGNIZE THAT BY SIGNING THIS APPLICATION I AM GIVING CONSENT TO EMPLOYEES OF THE STATE TO ENTER THE SUBJECT PROPERTY FOR THE PURPOSE OF PROCESSING THIS APPLICATION.

NAME AND TITLE OF APPLICANT OR LEGALLY AUTHORIZED REPRESENTATIVE (please print)

SIGNATURE _____ DATE _____

NAME AND TITLE OF CO-APPLICANT OR LEGALLY AUTHORIZED REPRESENTATIVE (please print)

SIGNATURE _____ DATE _____

This application must be signed by the applicant or an officer in the applicant=s business, a municipal official, etc. The application CANNOT be signed by the applicant=s attorney, engineer, contractor, etc.

Submittal of Application: Attach appropriate schedules, administrative processing and application review fees. Plans, specifications and other supporting material may be submitted electronically. Send application form, schedules (if applicable) and payment to:

**Vermont Department of Environmental Conservation
 Drinking Water and Groundwater Protection Division
 1 National Life Drive – Main 2
 Montpelier, VT 05620 - 3521**