

Drinking Water and Groundwater Protection Division

PERMIT TO OPERATE APPLICATION

For: **Public Community** and **Non-Transient Non-Community** Water Systems

I: Water System Information

Water System Name		WSID # ¹	
Town			
Administrative Contact ²		Phone #	
Applicant ³		Phone #	

NOTES: ¹**FOR NEW WATER SYSTEMS:** Write "new" in WSID # field if a WSID # has not yet been assigned to the Water System by the Division.

²**Administrative Contact** is the Applicant's legally appointed representative designated to receive correspondence from the Division regarding the Water System.

³**The Applicant** is the legal entity that is responsible for and has Operational Control of the Water System. Typically, the Applicant is the Owner of the Water System. If an entity other than the Owner is applying, the applicant must provide documentation establishing that they have operational control of and are responsible for the Water System.

II: Purpose of Application

- New Water System

Please Attach: System Description, including references to Source and Construction Permits; and the Capacity Determination issued by the Division.

- Existing System – Change of Ownership or Change of Operational Control

Please Attach: Record of Property Transfer or Sale, Documentation of the transfer of operational control and Responsibility for the Water System, and an updated Officials Contact Form.

- Existing System – Permit Amendment Request

Please Attach: Itemized list of requested changes with explanation of reasoning for each change, summary of improvements completed since last sanitary survey.

- Existing System – Permit Renewal

IMPORTANT: use only for renewal of permits containing an expiration date.

III: List of Attachments (Attach additional sheets as necessary)

1. _____
2. _____
3. _____

IV: Applicant's Statement

I, _____ (print name), _____ (title), hereby certify that the statements and representations made in this document are true and accurate to the best of my knowledge and that I am the Owner or have the lawful authority to sign this document on behalf of the Owner. I am applying for a Permit to Operate on behalf of a public water system, pursuant to Subchapter 21-5 of the Vermont Water Supply Rule. I consent to allow employees of the State of Vermont to enter the subject property and conduct all necessary inspections for the purpose of processing this application in accordance with state and federal safe drinking water standards and rule and the authority provided under the regulations being administered by the State of Vermont.

Signature _____

Date _____

Printed Name/Title _____

Email _____

Submit Electronically:

Instructions: <http://dec.vermont.gov/water/contacts>
ftp://ftp.anr.state.vt.us/Public_Water_Supply/

(NOTE: link **MUST** be opened in Windows Explorer, not a web browser)

Submit by Mail:

Drinking Water and Groundwater Protection Division
 1 National Life Drive, Main 2
 Montpelier, VT 05620-3521
 Phone: 802-828-1535
 Fax: 802-828-1541

FOR DIVISION USE ONLY:

- Ownership Verified
 Signature Verified
 Administratively Complete
 Technical Reviewer Assigned