



**Connecticut Department of
Energy & Environmental Protection**
Bureau of Water Protection & Land Reuse
Land & Water Resources Division

LWRD License Application Transmittal Form

CPPU USE ONLY

App #s: _____

-DIV

-FM/E
Doc #: _____
Check #: _____

The Land & Water Resources Division (LWRD) License Application* consists of this Transmittal Form and the program-specific form. All application forms can be found on the Department of Energy & Environmental Protection (DEEP) website at www.ct.gov/deep/lwrddpermittapps. Submit application forms per instructions provided in Part VII of this transmittal form.

Part I: License Type and Fee Information

The table below lists various License types issued by DEEP LWRD. If more than one license is necessary for a project, complete only one Transmittal Form. Complete as many Program Forms as applicable for the project. Check the boxes below that correspond with the LWRD license(s) being requested.

Type of License	Program Form	Fee
Licenses for Activities in Aquifer Protection Areas		
<input type="checkbox"/> Aquifer Protection Area Registration Check one: <input type="checkbox"/> New <input type="checkbox"/> Modification ¹ of # _____ (no fee) <input type="checkbox"/> Renewal of # _____	A	\$625
<input type="checkbox"/> Aquifer Protection Area Permit Check one: <input type="checkbox"/> New <input type="checkbox"/> Modification ¹ of # _____ (no fee) <input type="checkbox"/> Renewal of # _____	B	\$1,250
¹ Note that if you are seeking a <i>modification</i> , you should consult the Aquifer Protection Program at 860-424-3019 prior to application submittal to determine whether a registration form is necessary.		
Licenses for Activities in Tidal Waters		
<input type="checkbox"/> Structures, Dredging & Fill²	C	\$660
<input type="checkbox"/> Structures, Dredging & Fill² and Tidal Wetlands (TW)	C	\$660
<input type="checkbox"/> Structures, Dredging & Fill² and Section 401 Water Quality Certificate (WQC)³	C	\$660
<input type="checkbox"/> Structures, Dredging & Fill²; TW; and Section 401 WQC³	C	\$660
<input checked="" type="checkbox"/> Certificate of Permission (if applicable, WQC will be included) ² For projects larger than 825 square feet, provide Attachment A with an additional fee. Refer to the instructions (page 4) for fee calculations. ³ For activities requiring a Sec.404 Permit from United States Army Corps of Engineers (USACE).	D	\$375
General Permit Registration for Coastal Maintenance		
<input type="checkbox"/> Marina and Mooring Field Reconfiguration	E	\$700
<input type="checkbox"/> Remedial Activities Required by Order	F	\$700
<input type="checkbox"/> Residential Modification to FEMA Standards	G	\$100
<input type="checkbox"/> Reconstruction of Permitted Structures	H	\$300
General Permit Registration for Minor Coastal Structures		
<input checked="" type="checkbox"/> 4/40 Docks/Access Stairs	I	\$700
<input type="checkbox"/> Non-Harbor Moorings	J	\$250
General Permit Registration for Dolphin Cove		
<input type="checkbox"/> Structures, Fill, Obstructions, or Encroachments in Dolphin Cove Lagoon, Stamford	K	\$100

Part I: License Type and Fee Information (continued)

Type of License	Program Form	Fee
For Federal Agency Activities Only:		
<input type="checkbox"/> Section 401 Water Quality Certificate (Tidal)	C	None
Licenses for Activities in Non-Tidal Waters		
<input type="checkbox"/> Section 401 Water Quality Certificate (Individual) ³	L	None
<input type="checkbox"/> Pre-Construction Notification, USACE General Permits for CT ³	L	None
<input type="checkbox"/> Inland Wetlands and Watercourses ⁴	L	None
<input type="checkbox"/> Inland Wetlands and Watercourses ⁴ and WQC ³	L	None
³ For activities requiring a Sec.404 Permit from USACE.		
⁴ For State Agency Activities OR Activities Conducted on State Owned/Controlled Lands.		
For State Agency Activity Conducted on State Owned/Controlled Lands Only: General Permit Registration for Water Resources Construction Activities		
<input type="checkbox"/> Activities 1-4: Maintenance Plans	M	\$2,500
<input type="checkbox"/> Activities 5-7: Infrastructure and Public Works Projects	N	\$2,500
<input type="checkbox"/> Activity 8: Activities Authorized Under a Corps General Permit (Must be submitted after receiving PCN approvals and Flood Management, if applicable.)	O	\$1,250
<input type="checkbox"/> Activity 9: Conservation Activities	O	\$1,250
Additional Licenses for Activities These licenses may be combined with Tidal or Non-Tidal Waters licenses.		
Water Diversion – Non-consumptive		
<input type="checkbox"/> Watershed < 0.5 sq. mi.	L	\$2,050
<input type="checkbox"/> Watershed ≥ 0.5 sq. mi and < 2.0 sq. mi.	L	\$4,000
<input type="checkbox"/> Watershed ≥ 2.0 sq. mi.	L	\$6,250
For State Agency Activity/Activities Receiving Funding Through a State Agency:		
<input type="checkbox"/> Flood Management Certification	P	None
<input type="checkbox"/> Flood Management Certification with Exemption Request	P	None
Fee from Attachment A, if applicable		
Total		

*For processing purposes, the terms Application and Applicant are synonymous with the terms Registration and Registrant.

In addition to applicable boxes above, check here if your application is:

- ☐ eligible for a municipal 50% discount;
- ☐ for work in tidal waters and being submitted pursuant to CGS section 22a-361(a)(2)(d) to address a violation; or
- ☐ receiving state funding including federal funding administered by the state (to help determine need for Flood Management Certification).

Part II: Project and Site Information

1. Site Name and Location

Name of Site: 14 Owenoke Park Riprap and Dock

Address of Site: 14 Owenoke Park

City/Town: Westport

State: CT

Zip Code: 06880

Parcel Location/Tax Assessor's Reference: Map C03 Block _____ Lot 02

GPS Coordinates/Latitude and Longitude: Provide the exact location of proposed activity, in degrees/minutes/seconds or in decimal degrees: Latitude: 41.107580° N Longitude: 73.358000° W

Parcel/Easement size: If the project is located on a parcel, indicate parcel acreage: 0.73 acres

If the project is located on a utility/transportation right-of-way or easement, indicate dimensions or acres: _____

2. Project: Provide a brief description of project/activity/work: Construct pier, ramp and floating dock and retain riprap in Grays Creek

Part III: Applicant Information

- If an applicant is a corporation, limited liability company, limited partnership, limited liability partnership, or a statutory trust, they must be registered with the Secretary of State. If applicable, the applicant's name shall be stated **exactly** as it is registered with the Secretary of State. Please note, for those entities registered with the Secretary of State, the registered name will be the name used by DEEP. This information can be accessed at the Secretary of State's database (CONCORD) at portal.ct.gov/SOTS.*
- If an applicant is an individual, provide the legal name (include suffix) in the following format: First Name; Middle Initial; Last Name; Suffix (Jr, Sr., II, III, etc.).*
- Once an authorization has been received, if there are any changes or corrections to your company/facility or individual mailing or billing address or contact information, please complete and submit the [Request to Change Company/Individual Information](#) to the address indicated on the form.*

1. Applicant/Registrant* Information

Name: Owenoke Park Partners LLC

Mailing Address: 31 Imperial Avenue

City/Town: Westport

State: CT

Zip Code: 06880

Business Phone: _____

Ext.: _____

Contact Person: Mr. Robert F. Sprouls

Phone: 203-247-0705

Ext: _____

E-mail Address[†]: lbob@bluewaterhomebuilders.com

[†]Email is Required. By providing this e-mail address you are agreeing to receive official correspondence from DEEP, at this electronic address, concerning the subject application. Please remember to check your security settings to be sure you can receive e-mails from "ct.gov" addresses. Also, please notify DEEP if your e-mail address changes.

☐ If co-applicant(s), check this box and attach co-applicant information as Attachment B following this form.

a) Applicant Type (check one):

☐ individual ☐ federal agency ☐ state agency ☐ municipality ☐ tribal

☐ business entity (if a business entity, complete i through iii below):

i) business type: ☐ corporation ☒ limited liability company ☐ limited partnership
☐ limited liability partnership ☐ statutory trust ☐ Other: _____

ii) provide Secretary of the State business ID #: 3033375

This information can be accessed at database (CONCORD): portal.ct.gov/SOTS

iii) ☐ check here if your business is **NOT** registered with the Secretary of State's Office.

*For processing purposes, the terms Application and Applicant are synonymous with the terms Registration and Registrant.

Part III: Applicant Information (continued)

b) Applicant's interest in property at which the proposed activity is located:

- ☒ site owner ☐ option holder ☐ lessee ☐ facility owner
☐ easement holder ☐ operator ☐ other (specify): _____

2. List billing contact, if different than the applicant:

Name: _____
Mailing Address: _____
City/Town: _____ State: _____ Zip Code: _____
Business Phone: _____ Ext.: _____
Contact Person: _____ Title: _____
E-mail: _____

3. Primary contact for departmental correspondence and inquiries if different than applicant:

Name: Mr. John Hilts
Mailing Address: Post Office Box 47
City/Town: Rowayton State: CT Zip Code: 06853-0047
Business Phone: 475-441-1244 Ext.: _____
Contact Person: _____ Title: _____
E-mail: mrhilts@erols.com

4. Site/Property Owner*, if different than applicant:

Name: _____
Mailing Address: _____
City/Town: _____ State: _____ Zip Code: _____
Business Phone: _____ Ext.: _____
Contact Person: _____ Title: _____
E-mail: _____

***If the applicant is not the owner, submit written permission from the owner as Attachment C**

5. Facility Owner, if different than applicant:

Name: _____
Mailing Address: _____
City/Town: _____ State: _____ Zip Code: _____
Business Phone: _____ Ext.: _____
Contact Person: _____ Title: _____
E-mail: _____

6. Facility Operator, if different than applicant:

Name: _____
Mailing Address: _____
City/Town: _____ State: _____ Zip Code: _____
Business Phone: _____ Ext.: _____
Contact Person: _____ Title: _____
E-mail: _____

Part III: Applicant Information (continued)

7. Attorney or other representative, if applicable.

Firm Name: _____

Mailing Address: _____

City/Town: _____

State: _____ Zip Code: _____

Business Phone: _____

Ext.: _____

Attorney: _____

Title: _____

E-mail: _____

8. Engineer(s), surveyor(s) and/or other consultant(s) employed or retained to assist in preparing the application and designing or constructing the activity.

Name: _____

Mailing Address: _____

City/Town: _____

State: _____ Zip Code: _____

Business Phone: _____

Ext.: _____

Contact Person: _____

Title: _____

E-mail: _____

Service Provided: _____

Part IV: Pre-Application Coordination

If pre-application coordination occurred, provide DEEP LWRD staff contact information:

Staff Name: Mr. John Gaucher

Date: September 17, 2024

Part V: Supporting Documents

As applicable, check the box by the attachments listed to indicate that they have been submitted. When submitting any supporting documents, please label the documents as indicated in this part (e.g., Attachment A, etc.) and be sure to include the applicant's name as indicated on this application form. Attach the materials below following this transmittal form.

- ☐ Attachment A Structures, Dredging and Fill fee calculation worksheet (if applicable)
- ☐ Attachment B Co-applicant information sheet (if applicable)
- ☐ Attachment C Written permission from land owner (if applicant is not the owner)
- ☐ Attachment D Additional signature sheet (if applicable)

Part VI: Applicant Certification

The applicant(s) and any individual(s) responsible for actually preparing the application must sign this section. An application will be considered insufficient unless *all* required signatures are provided.

"I have personally examined and am familiar with the information submitted in the LWRD application and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief.

I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute.

I certify that the LWRD application is on complete and accurate forms as prescribed by the commissioner without alteration of the text.

I certify that I have complied with all notice requirements, if applicable, as listed in Section 22a-6g of the General Statutes."

Signature of Applicant

Date

Mr. Robert F. Sprouls

Name of Applicant (print or type)

Manager, Owenoke Park Partners LLC

Title (if applicable)

Signature of Preparer (if different than above)

Date

Mr. John Hilts

Name of Preparer (print or type)

Application Preparer

Title (if applicable)

☐ Check here if additional signatures are required. If so, please reproduce this sheet and attach signed copies to this sheet as Attachment D. You must include signatures of any person preparing any report or parts thereof required in this application (i.e., professional engineers, surveyors, soil scientists, consultants, etc.).

Part VII: Application Submission

Instructions for submitting an application to DEEP LWRD:

1. Please submit a hardcopy of **only** this completed License Application Transmittal Form and fee, to:

**CENTRAL PERMIT PROCESSING UNIT
DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127**

Applications will not be processed without the fee. Fee shall be non-refundable and shall be paid by check or money order to the Connecticut Department of Energy & Environmental Protection.

2. Upon receipt of the Transmittal Form and fee, the Central Permit Processing Unit (CPPU) will e-mail a confirmation receipt letter to you containing the DEEP assigned application number.
3. Upon receipt of the email from CPPU, electronically submit the full application package with the remaining required forms:
 - a. Send an empty/blank email to DEEP.LWRDRegulatorySubmittals@ct.gov
 - b. An automated email response will contain instructions for uploading this Transmittal Form and applicable Program Forms, management plans, or additional supporting documents of your application to the LWRD File Transfer Protocol (FTP) website.
 - c. Follow directions contained in the email for uploading the application sections.

If you are not capable of submitting the application electronically or if you have other questions or concerns regarding application submittals, please contact LWRD staff at 860-424-3019.