



February 5, 2024

Inland Wetlands Commission  
27 Main Street, PO Box 548  
Salisbury, MA 06068

Dear Agent,

Please find enclosed the Permit Application for the Use of Pesticides in State Waters that has been submitted to the Connecticut Department of Energy & Environmental Protection for the Hotchkiss School located at 11 Interlaken Road in Lakeville.

If any additional information is needed please do not hesitate to contact us.

Sincerely,

***Kate Clisham***

Kate Clisham  
Permit Coordinator  
SOLitude Lake Management  
508-981-7036  
[kate.clisham@solitudelake.com](mailto:kate.clisham@solitudelake.com)

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**Connecticut Department of  
Energy & Environmental Protection**  
Bureau of Materials Management & Compliance Assurance  
Engineering & Enforcement Division

## Permit Application for the Use of Pesticides in State Waters

### Affiliations:

Description: **Hotchkiss School**

Filed By: **Kate Clisham**

E-mail: **andrew.felter@solitudelake.com**

#### Affiliations

Type	Name	Mailing Address	Business Phone	Contact
Applicant	SOLITUDE LAKE MANAGEMENT, LLC	590 Lake St Shrewsbury, MA 01545, US	508-865-1000	Kate Clisham 508-981-7036 kate.clisham@solitudelake.com
Billing Contact	SOLITUDE LAKE MANAGEMENT, LLC	590 Lake St Shrewsbury, MA 01545, US	508-865-1000	Kate Clisham 508-981-7036 kate.clisham@solitudelake.com
Primary Contact	SOLITUDE LAKE MANAGEMENT, LLC	590 Lake St Shrewsbury, MA 01545, US	508-865-1000	Kate Clisham 508-981-7036 kate.clisham@solitudelake.com
Owner				
Pesticide Applicator	SOLITUDE LAKE MANAGEMENT, LLC	590 Lake St Shrewsbury, MA 01545, US	508-865-1000	Dominic Meringolo 508-865-1000 dmeringolo@solitudelake.com

## Part I: Application Type and Description

### Application Type

This application is to request (check one):

- ☐ One year permit
- ☐ Two year permit
- ☒ Three year permit

*Note: Multi-year permits will be issued at the Department of Energy and Environmental Protection's (DEEP) discretion.*

☒ Check here if DEEP has previously issued an Aquatic Pesticide Permit for this site.

Permit Number for most recent permit: **AQUA-2021-461**

☐ Check here if the information contained in this application is identical to the last application and the chemicals, quantities and number of treatments requested are identical to the chemicals, quantities and number of treatments permitted by the most recent permit issued.

Town where site is located: **Lakeville**

Brief Description of Project: **Aquatic Pesticide Application of Hotchkiss School Pond in Lakeville**

## Part II: Fee Information

*An application fee of \$200.00 [#1009] is to be submitted with each permit that you are applying for. Each site requires a separate permit. The application will not be processed without payment of the fee. If you are applying for a multi-year permit, see Part II of the instructions for information on fee payment. There is no discount for municipalities. The fee shall be non-refundable and shall be paid by e-check or credit card to the Department of Energy and Environmental Protection.*

## Part III: Site Location

Name of Waterbody **Hotchkiss School Pond**

### SITE LOCATION

11 INTERLAKEN RD, LAKEVILLE, CT 06039, [Salisbury]

## Part IV: Applicant Information

☒ Additional information is required for applicant

Please indicate the type of business

☐ corporation

☒ limited liability company

☐ limited partnership

☐ limited liability partnership

☐ statutory trust

☐ other

ii) provide Pesticide Application Business Registration Number: **PMBR.03268**

Registration Expiration Date **08/31/2024**

b) Applicant's relationship to the property at which the proposed activity is to be located:

☐ site owner

☐ option holder

☐ lessee

☐ easement holder

☐ operator

☒ pesticide applicator

☐ other

## 2. Owner Information

a. If known, list the name and address of all owners of the area(s) to be treated. If unsure, go to item #2b.

b. If the applicant is unsure of who owns an area(s) to be treated, provide the name and address for all shoreline property owners located 200 feet or less from such area. However, if the applicant does know who owns the area to be treated, then return to the 'Companies/Entities/Individuals Associated with the Filing' section by selecting the arrow in the top left corner of this screen and add the Owner(s).

**Name of Shoreline Property Owner**

**Address**

The Hotchkiss School

11 Interlaken Road, Lakeville, CT 06039

Does the State of Connecticut own any portion of the area to be treated?

☐ Yes

☒ No

*\*If an area(s) to be treated is owned or controlled by the state of Connecticut, see instructions*

*for submitting an application to the DEEP Land Acquisition and Management Unit (LAM) for review and approval of the proposed treatment on state property. A LAM Authorization letter must be submitted as Attachment G for any application involving treatment of a waterbody that is owned or controlled by the state of Connecticut.*

## 3. Pesticide Applicator

Is this a Commercial Application?

☒ Yes

☐ No

Pesticide application Certification Number **PMCS-0003994**

Pesticide application Certification Expiration Date **01/31/2028**

## Part V: Additional Information

*If the applicant is submitting this application on behalf of someone else, identify the person(s) or organization(s) seeking to have pesticides applied to the treatment area(s) and provide the following information. If more than one person or organization is being represented, attach additional sheets providing the information requested below.*

<b>Name</b>	<b>Mailing Address</b>	<b>Business Phone</b>	<b>Contact Person</b>
Hotchkiss School	PO Box 800, Lakeville, CT 06039	8604353605	Andrew Fenn

## Part VI: Site Information

### 1. COASTAL AREA

Is this pesticide application located in the municipality within the coastal area? (check town list in the instructions)

☐ Yes

☒ No

*For assistance in determining if the water being treated is affected by tidal water as described above or in completing the Coastal Consistency Review form, contact the Office of Long Island Sound Programs (OLISP) at 860-424-3034.*

### 2. NATURAL DIVERSITY DATA BASE (NDDDB) - ENDANGERED OR THREATENED SPECIES

According to the most current 'Natural Diversity Data Base Areas Maps', will the activity which is the subject of this application, including all impacted areas, be located within an area identified as, or otherwise known to be, a habitat for state listed endangered, threatened or special concern species?

☐ Yes

☒ No

Date of Map **06/2023**

### 3. AQUIFER PROTECTION AREAS

Is the site located within a town required to establish Aquifer Protection Areas, as defined in section 22a-354a through 354b of the General Statutes (CGS)?

☐ Yes

☒ No

To view the applicable list of towns and maps visit the DEEP website at <http://www.ct.gov/deep/aquiferprotection>

### 4. CONSERVATION OR PRESERVATION RESTRICTION

Is the property subject to a conservation or preservation restriction?

☐ Yes

☒ No

### 5. TYPE OF AREA TO BE TREATED

Select area type

☐ Tidal Waters

☒ Pond or Lake

☐ Stream

## 6. PUBLIC WATER SUPPLY WATERSHED

Is the waterbody located in a public water supply watershed?

(See instructions)

☐ Yes

☒ No

## 7. WATERBODY LOCATION FROM PUBLIC WATER SUPPLY

Is the waterbody potentially located 200 ft. or less from a public water supply well?

☐ Yes

☒ No

## 8. Where does the waterbody flow to?

Name of receiving stream or waterbody? **Wononpakook Lake**

Is the outflow usually flowing?

☐ Yes

☒ No

Can outflow be stopped?

☐ Yes

☒ No

## 9. SIZE OF WATERBODIES TO BE TREATED

Identify the size of the waterbody(ies) and the portion of the waterbody(ies) to be treated. Refer to the instructions.

What type of waterbodies will be treated?

☒ Ponds and Lakes

☐ Streams and Rivers

Will more than 80 Acres be treated?

☐ Yes

☒ No

Name of Waterbody	Total Acres	Average Depth ft.	Total Volume Acre ft.	Acres	Volume Acre ft.
Hotchkiss School Beaver Pond	4	4	16	4	0
Hotchkiss School Upper Pond	6.4	5	31.5	5.3	0

#### 10. PROPOSED PRODUCT TO BE USED

*Identify each proposed product to be used, the amount per treatment, the number of treatments and the surface area (acres) or volume (acre feet) of water to be treated with that product. If more than one waterbody will be treated, provide this information for each waterbody. Provide quantities using only in the units specified in the instructions.*

Name of Waterbody	Full Product Name	Active Ingredient	Amount per Treatment	Measurement Units	Number of Treatment	Acres	Volume Acre-ft
Hotchkiss School Beaver Pond	AquaPro	Glyphosate (isopropylamine salt) (53.8%)	12	Quarts	2	4	0
Hotchkiss School Upper Pond	AquaPro	Glyphosate (isopropylamine salt) (53.8%)	19.2	Quarts	2	6.3	0

#### 11. PUBLIC ACCESS

Does the waterbody have public access?

☐ Yes

☒ No

#### 12. STATE-OWNED BOAT LAUNCH

Is there a  
state-owned boat launch?

☐ Yes

☒ No

#### 13. STOCKED WITH FISH

Is the waterbody stocked with fish by the state?

☐ Yes

☒ No

#### 14. USE OF WATERBODY

Identify use(s) of waterbody:

☐ Domestic Water Supply

☐ Irrigation

☐ Watering Livestock

☐ Swimming

☒ Fishing

☐ None



## 15. DOWNSTREAM USERS AFFECTED BY TREATMENT

Are there any downstream users of the water who may be affected by treatment?

- ☐ Yes  
☒ No

## 16. PRIVATE DRINKING WELLS

Within 200 ft. inclusive of the treatment area are there any private drinking water wells 50 ft. or less from the shoreline?

- ☐ Yes  
☒ No

## 17. PLANTS OR ANIMALS TO BE CONTROLLED

Identify all plants or animals to be controlled: **Common reed (Phragmites australis)**

## 18a. FISH PRESENT

Identify all types of fish present: **No sensitive fish present**

## 18b. ALKALINITY OF WATER

If a copper-based product will be used and there are fish species sensitive to copper, what is the alkalinity of the water to be treated? Please include units.

Value

## 19. TIME PERIOD OF PESTICIDE USE

Projected Date(s) of Pesticide Use **9/1, 9/15**

## 20. PRIOR YEARS CHEMICALS WERE APPLIED TO WATERBODY

List prior years in which chemicals were applied to this waterbody: **2015, 2016, 2020-2023**

# Part VII: Supporting Documentation

*Be sure to read the instructions (DEEP-PEST-INST-200) to determine whether the attachments listed are applicable to your specific activity. Check the applicable box below for each attachment being submitted with this application form. 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.*

### ☒ Attachment A - Aerial Map

File name: Site Locus.pdf

File Upload Date: 02/02/2024 14:30:30

☒ **Attachment B - Applicant Compliance Review Form**

File name: 2024\_CT DEEP Compliance attachment.pdf

File Update Date: 01/31/2024 09:10:42

Applicant Compliance Information Form  
(DEEP-APP-002), if applicable.

☐ **Attachment C - Coastal Consistency Review Form**

Coastal Consistency Review Form  
(DEEP-APP-004), if applicable.

☐ **Attachment D - NDDDB Determination Response**

*A copy of the NDDDB Determination response letter that has not expired, if applicable. Include a copy of any mitigation measures developed for this activity and approved by NDDDB. Do not submit any NDDDB Preliminary Site Assessments with your application. Be aware that you must renew your NDDDB Determination if it expires before project work commences.*

☐ **Attachment E - Verification of Notification to Local Inland Wetland Agency**

*Verification of Notification to Local Inland Wetland Agency:*

*Note:*

*To submit your Verification of Notification to Local Inland Wetland Agency, you must first complete all other portions of this application, select 'Save', then select 'Download PDF' from the bottom of this screen to download a copy of your application.*

*You must send a copy of your completed application to the local Inland Wetland Agency, and then return to this application page to upload your verification as Attachment E above.*

*You will then be able to submit your completed application for review.*

*The following are acceptable forms of Verification of Notification:*

- copy of a certified mail receipt, or*
- a copy of the application stamped and dated as received by the local inland wetlands agency, or*
- an e-mail from the local inland wetlands agency verifying that this completed application has been received by such agency. If sending via email, you must first contact the local inland wetlands agency to verify that this method of delivery is acceptable.*

*Refer to the*  
*instructions*

☐ **Attachment F - Conservation or Preservation Restriction Information**

*Conservation or Preservation Restriction Information, if applicable.*

☐ **Attachment G - DEEP Land Management Unit Authorization**

*DEEP Land Management Unit's Authorization letter for treatment of a state owned or controlled*

☐ **Attachment H - Approval under G.P. for Point Source Dischargers to Waters of the State from Application of Pesticides**

*Approval under the  
General Permit for Point Source Discharges to Waters of the State from the Application of Pesticides  
, if applicable.*

☐ **Attachment I - Department of Public Health comments**

*Department of Public Health comments if the proposed treatment area(s) is located 200 ft. or less from a public water supply well or if the waterbody is located within a public water supply watershed and the application proposes the use of flumioxazin or triclopyr.*

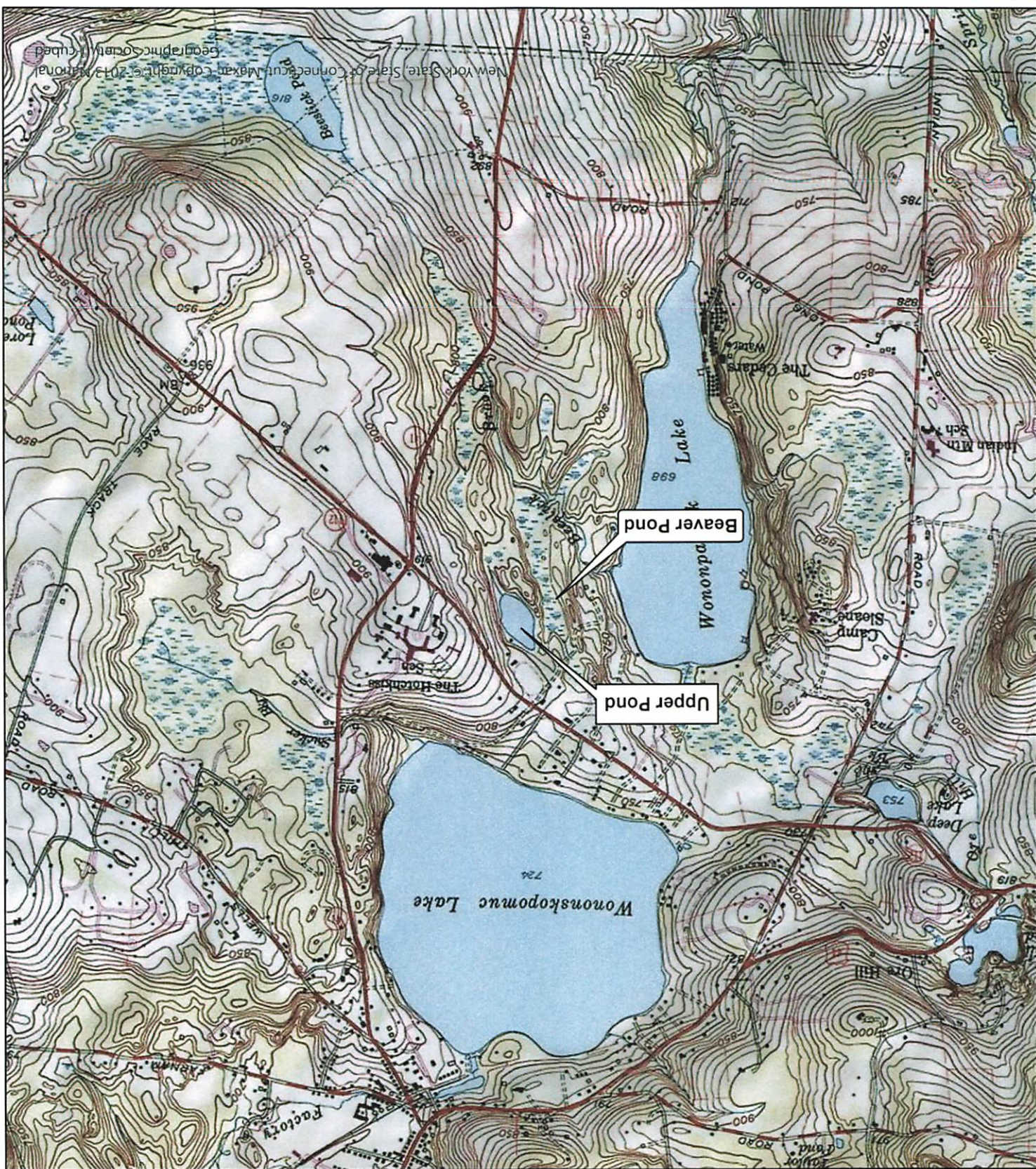
☐ **Attachment J - Other Supporting Documents**

*If you have additional documents or information to support your application that are not otherwise specified above, upload them here. This can include recent vegetation surveys, long term management plans, or other information specific to your site that could aid in the review of your application.*

Draft Copy



FIGURE 1 Site Locust



Hotchkiss  
School Ponds  
Lakeville, CT

Upper and Lower Ponds

0 1,000 2,000 Feet

1:24,000

N

Prepared by: KC  
Office: SHREWSBURY, MA





**Connecticut Department of  
Energy & Environmental Protection**

## Applicant Compliance Information

DEEP ONLY

App. No. \_\_\_\_\_  
Co./Ind. No. \_\_\_\_\_

**Applicant Name:** SOLitude Lake Management

**Mailing Address:** 590 Lake Street

**City/Town:** Shrewsbury

**State:** MA

**Zip Code:** 01545

**Business Phone:** 508-865-1000

**ext.:**

**Contact Person:** Kate Clisham

**Phone:** 508-981-7036 **ext.**

**\*E-mail:**

If you answer yes to any of the questions below, you must complete the Table of Enforcement Actions on the reverse side of this sheet as directed in the instructions for your permit application.

- A. During the five years immediately preceding submission of this application, has the applicant been convicted in any jurisdiction of a criminal violation of any environmental law?

☐ Yes ☒ No

- B. During the five years immediately preceding submission of this application, has a civil penalty been imposed upon the applicant in any state, including Connecticut, or federal judicial proceeding for any violation of an environmental law?

☒ Yes ☐ No

- C. During the five years immediately preceding submission of this application, has a civil penalty exceeding five thousand dollars been imposed on the applicant in any state, including Connecticut, or federal administrative proceeding for any violation of an environmental law?

☒ Yes ☐ No

- D. During the five years immediately preceding submission of this application, has any state, including Connecticut, or federal court issued any order or entered any judgement to the applicant concerning a violation of any environmental law?

☒ Yes ☐ No

- E. During the five years immediately preceding submission of this application, has any state, including Connecticut, or federal administrative agency issued any order to the applicant concerning a violation of any environmental law?

☒ Yes ☐ No

### Table of Enforcement Actions

(1) Type of Action	(2a) Date Commenced	(2b) Date Terminated	(3) Jurisdiction	(4) Case/Docket/ Order No.	(5) Description of Violation
Order on Consent-Civil Penalty	10/29/2018	10/29/2018	State of New York Dept. of Environmental Conservation	R3-20180612-118	Insufficient post-treatment notification to NYSEC regarding treatments at Leesville GC & New Croton Res.
Order on Consent-Civil Penalty	7/31/2019	2/27/2020	State of CT- CT DEEP	cowspts-2019-004	Failure to fulfill permit requirements

☐ Check the box if additional sheets are attached. Copies of this form may be duplicated for additional space.