

B51d

Change in Use Application for Properties with Public Sewer and Private Well INSTRUCTIONS

This form is used to conform to the State of Connecticut Public Health Code, Section 19-13-B51d. Property owners must file an application with the local health department indicating the location of the building addition, accessory structure or pool location. B51d refers only to well separating distances.

No such well shall be located within 25 feet of the high water mark of any surface water body, nor within 25 feet of drain carrying surface water or of a foundation drain or pool.

Recommended separating distance between a well and any structure is 10 feet from storage sheds, or an addition, provided there are no foundation drains.

In addition to filling out this form, you will also have to submit the following with your application:

- If your home was built prior to 1985, please have your **deed or the previous owners name** available. This information can be obtained from your Town Clerk.
- A **plot plan** drawn to scale (Example: 1 inch = 20 feet) which shows the location of the house, well, sewer line, and closest property lines. Be sure to indicate distances between each item.
- A **written description** of the proposed addition, accessory structure or pool.
- If proposing an addition to an existing structure, please provide a **sketch** of the **existing floor plan and a sketch** of the **proposed floor plan** change.

In the event of application withdrawal by the applicant, NDDH reserves the right to retain a non-refundable processing fee.

In order to avoid unnecessary delays, please be sure to complete the form in its entirety and submit all required information and fees. Do not fax, return by mail.



For additional assistance, please contact us:

Northeast District Department of Health

69 South Main Street, Unit 4

Brooklyn, CT 06234

Phone: 860-774-7350 / Fax: 860-774-1308 / www.nddh.org



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Office Hours: Monday - Friday 7:00 am – 4:00 pm

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**Change in Use Application for Properties with Public Sewer and Private Well
To conform to PHC 19-13-B51d. Location/Well Separating Distances
(See Reverse Side for Instructions)**

Town: _____ **Street #:** _____ **Street:** _____
Assessor's Map: _____ **Block:** _____ **Lot:** _____ **Dev. Lot:** _____ **Lot Size:** _____

Legal Owner: _____

Mailing Address: _____

Town: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Email Address: _____

Year Built: _____ No. of Bedrooms: _____

Proposal for Change: _____

Agent for Owner: _____

Agent's Mailing Address: _____

Town: _____ State: _____ Zip: _____

Agent's Phone Number: _____

Signature of Legal Property Owner:

Date:

PROPERTY OWNER: By signing above, you certify that the information provided is a true and accurate description of the addition, accessory structure, or pool.

No services will be rendered until payment is received. Do not fax, return by mail. In the event of application withdrawal by the applicant, NDDH reserves the right to retain a non-refundable processing fee.

NDDH Use Only

File #: _____ B51d/Change in Use Fee: _____

Name ID #: _____ Receipt # _____ Check # _____ Date: _____