



License Number: _____

Date Received: _____

Received by: _____ (initials)

Town Fee: _____ Record Fee: _____

TOWN OF BRISTOL JUNKYARD LICENSE APPLICATION FORM

Pursuant to NH RSA 236:114, a person shall not operate, establish, or maintain a junkyard or machinery junkyard until he/she (1) has obtained a license to operate a junkyard business and (2) has obtained a certificate of approval for the location of the junkyard.

Applications for the establishment of a new junkyard must be accompanied by a certificate of approval for the location of the junkyard, and an approved Variance from the Bristol Zoning Board of Adjustment. A Public Hearing will be held by the Board of Selectmen on all applications for the establishment of a new facility. Public Hearings will be scheduled within 14-28 days following receipt of a completed application and a complete inspection by the Bristol Land Use Enforcement Officer. A list of abutters must be included with all applications for new facilities.

FACILITY IDENTIFICATION

Facility Name: _____

Street Location: _____

Mailing Address: _____

Tax Map & Lot #: _____

License Type:

____ New Facility

____ Renewal of existing license

____ Existing unlicensed facility – year established: _____

Attach proof/supporting document for the date established.

Has the facility ever been licensed? _____

If yes, then attach a copy of the most recent license.

APPLICANT IDENTIFICATION

Name: _____

Mailing Address: _____

Telephone Number: _____

Applicant's Date of Birth: _____

OWNER INFORMATION:

Same as above: _____ (If different owner, then indicate correct owner information below)

Name: _____

Mailing Address: _____

Telephone Number: _____

Owner's Date of Birth: _____

CERTIFICATIONS AND OTHER SUPPORTING DOCUMENTATION:

No application will be considered complete without the following documentation (if applicable):

1. Proof that the applicant has the legal right to use the property for the purposes described in the application.
2. Applicant's Certification of Compliance with Best Management Practices established by the New Hampshire Department of Environmental Services (NHDES).
3. Copy of approved facility inspection through the Town.
4. Criminal Records Release Authorization Form and payment (for all applicable parties)
5. Copy of other permits/approvals if applicable:
 - a) Certificate of Approved Location, issued by the Zoning Board of Adjustment (ZBA)
 - b) Variance approval, issued by the ZBA
 - c) Site Plan Review approval, issued by the Planning Board (PB)
 - d) Motor Vehicle Dealer License, issued by New Hampshire Department of Safety (NHDOS)
 - e) License to Operate, issued by NH Department of Transportation (NHDOT) - required if the facility is within 1000 feet or visible from certain federally funded highways
 - f) Hazardous Waste Identification Number - required if the facility generates hazardous waste or burns used oil.
 - g) NHDES Storm Water Permit Notice of Intent - required if storm water is discharged from the property via a ditch, swale, culvert, pipe, drain, or other point source, to surface water.
 - h) Approval to connect open floor drains in fluid handling areas to a Publicly Owned Treatment Works (POTW) or registered holding tank.
 - i) Aboveground Storage Tank (AST) registration - required if petroleum storage capacity is greater than 660 gallons in any single tank or container or 1320 gallons in any combination of tanks and containers, 55 gallons or larger.
 - j) Underground Storage Tank (UST) registration
 - k) Groundwater Release Detection Permit - required for existing facilities located in Class GAA groundwater protection areas.
 - l) Approval from the United States Environmental Protection Agency (USEPA) to operate a secondary aluminum recovery furnace (sweat furnace)
 - m) For existing facilities, copies of all inspection/ investigation reports and related correspondence generated during the last 12 months for all NHDES facility inspections and complaint investigations.

DISCLOSURES/OTHER INQUIRIES:

Have you ever been convicted of larceny or receiving stolen goods? If yes, provide the relevant details:

Are you or the facility the subject of an administrative or judicial enforcement action for a violation of environmental statutes and rules? If yes, provide the relevant details:

Is the facility sited on property that is undergoing remedial action under the direction of the NHDES to clean up contamination? If yes, identify the nature of the problem, the name and telephone number of the NHDES project manager and contractor, and provide the current status of the project.

Storage capacity for other waste types: _____

Storage capacity for storing all other key waste items named in Facility Operations above:

Other storage items: _____

FACILITY SITE PLAN

A site plan must be included with all applications showing and identifying the following (if applicable):

1. Property boundaries with reference to permanent boundary markers
2. Rights-of-way and easements
3. Surrounding land use abutters
4. Access road(s) leading to the facility and all access points
5. On-site access roads
6. Above and below ground utilities
7. Septic systems
8. Surface waters and wetlands
9. Fences, gates, signs and other access control features
10. Building and other structures
11. Drinking water wells and/or surface water intakes within 400 feet
12. Storm water control features, including ditches, swales, culverts, detention basins, and other storm water collection and discharge points
13. Storage areas and devices for each type of waste the facility handles
14. Designated footprints for all on the ground stockpiles, with surrounding fire lanes, as needed
15. For a motor vehicle junkyard:
 - a) Storage area for incoming/unprocessed vehicles
 - b) Vehicle dismantling/drainage/processing area, including impervious spill control and containment pad to keep spills and leaks off the ground
 - c) Storage area for processed vehicle
 - d) Vehicle crushing area, including provisions for protecting ground surface around the crusher as needed to keep spills and leaks off the ground
 - e) Storage area for greasy, oily, and fluid containing parts, including provisions to keep parts off the ground on an impervious spill containment surface, sheltered from rain and snow
 - f) Storage area for other used parts
 - g) Fluid storage area (gasoline, used oil, antifreeze, etc.), including roofed secondary containment devices if the storage area is outdoor
 - h) Tire storage area
 - i) Other impervious spill control/containment surfaces
16. Ties showing the facility meets the required setback distances to certain critical features, including but not limited to:
 - a) Roads – a new facility may not be closer than 660 feet from the right-of-way lines for a class I, II, III, or III-a highway, or closer than 300 feet from the right-of-way lines for a class IV, V, or VI highway
 - b) Property boundaries
 - c) Wells and groundwater protection areas – no fluid storage areas within 75 feet of a private well or within the protective radius (typically 400 feet) of public water supply wells. New facilities are prohibited in Class GAA wellhead protection areas
 - d) Surface waters – fluids must be stored at least 50 feet from surface waters
 - e) Wetlands – intrusion into wetlands is prohibited, if the facility is within 100 feet of a wetlands the application may require Wetlands Bureau approval through NHDES
 - f) Flood Zone – if located in a flood zone the application must show how all waste and fluids will be protected from flood impacts
 - g) Rivers – new facilities must be setback at least 250 feet from designated rivers, existing facilities may not expand closer to any designated river
 - h) Shoreland Protection Act – new facilities must be setback at least 250 feet from any shoreland, existing facilities may not expand closer to any shoreland
 - i) Storm drains/catch basins – fluids must be stored at least 50 feet from storm drains/catch basins

DESCRIPTION OF FACILITY OPERATIONS:

Type of enterprise: ☐ Commercial ☐ Private

Types of junk, waste, and other items the facility receives or intends to receive and stores or intends to store (please check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Cars and light trucks | <input type="checkbox"/> Heavy trucks and construction vehicles |
| <input type="checkbox"/> OHRVs, ATVs | <input type="checkbox"/> Lawn & garden equipment |
| <input type="checkbox"/> Farm equipment | <input type="checkbox"/> Boats/watercraft |
| <input type="checkbox"/> Campers/trailers | <input type="checkbox"/> Mobile homes |
| <input type="checkbox"/> Machinery/tools | <input type="checkbox"/> Washers, dryers, other appliances |
| <input type="checkbox"/> Pipes and fittings | <input type="checkbox"/> Plumbing fixtures |
| <input type="checkbox"/> Aluminum beverage containers | <input type="checkbox"/> Aluminum scrap |
| <input type="checkbox"/> Cable/wire | <input type="checkbox"/> Metal turnings |
| <input type="checkbox"/> Cast iron radiators, boilers | <input type="checkbox"/> Propane tanks |
| <input type="checkbox"/> Other compressed gas tanks | <input type="checkbox"/> Empty petroleum storage tanks |
| <input type="checkbox"/> Other storage tanks | <input type="checkbox"/> Drums |
| <input type="checkbox"/> Structural steel | <input type="checkbox"/> Other ferrous (iron) scrap |
| <input type="checkbox"/> Electrical devices/equipment | <input type="checkbox"/> Construction or demolition debris |
| <input type="checkbox"/> Other: _____ | |
- _____

Days/Hours of Operation: _____

Types of on-site business activities:

- | | |
|--|---|
| <input type="checkbox"/> Used part sales | <input type="checkbox"/> Swap shop |
| <input type="checkbox"/> Second hand shop | <input type="checkbox"/> Used motor vehicle sales |
| <input type="checkbox"/> New motor vehicle sales | <input type="checkbox"/> Body shop |
| <input type="checkbox"/> Repair shop | <input type="checkbox"/> Towing yard |
| <input type="checkbox"/> Impoundment area | <input type="checkbox"/> Other: _____ |
- _____

Number of Employees: _____

Types of on-site processing activities and related equipment:

- | | |
|---|---|
| <input type="checkbox"/> Sorting – hand | <input type="checkbox"/> Sorting – magnet |
| <input type="checkbox"/> Cutting – torches | <input type="checkbox"/> Cutting – shears |
| <input type="checkbox"/> Crushing – on-site unit | <input type="checkbox"/> Crushing – mobile crushing service |
| <input type="checkbox"/> Shredding | <input type="checkbox"/> Bailing |
| <input type="checkbox"/> Smelting EPA approval # _____ | |
| <input type="checkbox"/> Used oil burner on site heat DEA approval # _____ | |
| <input type="checkbox"/> Parts washer HW generator identification # _____ | |
| <input type="checkbox"/> Oil/Water separator – Waste water destination: _____ | |
| <input type="checkbox"/> Freon/refrigerant evacuation equipment EPA approved | |
| <input type="checkbox"/> Underground storage tanks DES registration # _____ | |
| <input type="checkbox"/> Above-ground storage tanks DES registration # _____ | |
| <input type="checkbox"/> Other: _____ | |

FACILITY SIZE/CAPACITY:

Number of End of Life Vehicles (ELVs) received annually on average: _____

Number of ELVs processed annually on average: _____

ELV storage capacity (# of vehicles and/or size of storage area): _____

Length of time ELVs are stored before removal: _____

Number of ELVs currently stored: _____

Tire storage capacity (# of tires and/or size of storage area): _____

Number of tires currently stored: _____

Battery storage capacity (# of batteries and/or size of storage area): _____

Fluid storage capacity (gallons by fluid type): _____

APPLICATION FEE (payment to the Town of Bristol):

___ Application for a new facility \$200.00

___ Renewal of existing license \$50.00

___ Existing unlicensed facility \$50.00

CRIMINAL RECORDS CHECK FEE (payment to State of NH – Criminal Records):

___ Record check fee per person \$25.00

I certify that the information included with this application is accurate and complete to the best of my knowledge. That any license issued based on inaccurate information is subject to immediate withdrawal. That the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction. I further certify that I am aware of and will comply with, any deed restrictions or covenants, and any regulations or conditions imposed by the Selectmen, Zoning Board of Adjustment and/or Planning Board as it relates to this property and the proposed use. I understand that the License must be prominently displayed. Failure to prominently display the License is sufficient grounds for withdrawal of the License.

Signature of Applicant

Print Name of Applicant

Date

Signature of Applicant

Print Name of Applicant

Date