



CHANGE OF OWNERSHIP FOR ALTERNATIVE/EXPERIMENTAL TECHNOLOGY

Rhode Island Department of Environmental Management
Onsite Wastewater Treatment Systems Program
Office of Water Resources

235 Promenade Street, Providence, RI 02908-5767
Tel. (401) 222-3961; Email: DEM.OWTS@dem.ri.gov
www.dem.ri.gov/septic



INNOVATIVE OR ALTERNATIVE TECHNOLOGY:

Alternative System or Technology System Component Experimental System

INNOVATIVE OR ALTERNATIVE TECHNOLOGY or COMPONENT – CLASS

Class One Class Two

NEW COMPANY NAME:

MAILING ADDRESS (STREET)

(CITY/TOWN, STATE)

TECHNOLOGY NAME:

TELEPHONE NUMBER:

CONTACT PERSON:

EMAIL:

If applicant is not the manufacturer, indicate authority to distribute technology:

- The applicant has sole authority to distribute or authorize distribution of the subject technology in Rhode Island.
- The applicant does not have sole authority to distribute or authorize distribution of the subject technology in Rhode Island and has enclosed herewith a letter from the manufacturer authorizing the applicant to seek AE technology approval.

I CERTIFY THAT THE INFORMATION ABOVE AND ATTACHED HERETO WAS PREPARED IN ACCORDANCE WITH THE PROCEDURES PRESCRIBED IN RIDEM "250-RICR-150-10-6 RULES ESTABLISHING MINIMUM STANDARDS RELATING TO LOCATION, DESIGN, CONSTRUCTION AND MAINTENANCE OF ONSITE WASTEWATER TREATMENT SYSTEMS", AND THAT THE INFORMATION IS TRUE, ACCURATE AND COMPLETE.

SIGNATURE OF APPLICANT _____ DATE _____

JOB TITLE _____

*THIS APPLICATION IS TO BE USED TO TRANSFER OWNERSHIP TO A NEW OWNER OF A TECHNOLOGY OR COMPONENT ONLY. IT IS NOT TO BE USED TO APPLY FOR A PERMIT TO INSTALL THE TECHNOLOGY OR COMPONENT AT A SITE.

APPLICATION CHECKLIST

THE FOLLOWING ITEMS MUST BE INCLUDED WITH YOUR SUBMISSION:

One hard copy and one digital (pdf) copy of above application and all required attachments;

Proof of new ownership;

Copy of current RIDEM A/E technology certification and associated design and installation manuals;

Letter from new owner to RIDEM agreeing to comply with current RIDEM A/E Technology Certification;

Note: contact our office for guidance on submitting electronic copies prior to submission.

Note: Carefully review submittal requirements.

INCOMPLETE APPLICATIONS: APPLICANTS WILL BE INFORMED OF DEFICIENCY AND THE APPLICATION WILL NOT BE REVIEWED UNTIL ALL REQUIRED SUPPLEMENTAL MATERIAL HAS BEEN SUBMITTED.

Complete all data and forward the complete package to:

RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF WATER RESOURCES
OWTS PROGRAM
235 PROMENADE STREET
PROVIDENCE, RI 02908-5767

And

Ryan.Brock@dem.ri.gov

Questions pertaining to the application process should be directed to Ryan Brock at (401) 222-3961 extension 2777601 or Ryan.Brock@dem.ri.gov.