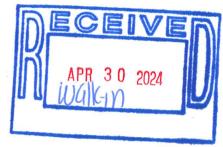


#### Office Use Only Project# Address: MBL:

INLAND WETLANDS & WATERCOURSES AGENCY TOWN OF EAST HAMPTON



#### Minimum Requirements for Submission of Application to **Inland Wetlands and Watercourses Agency**

This form must be submitted with your application

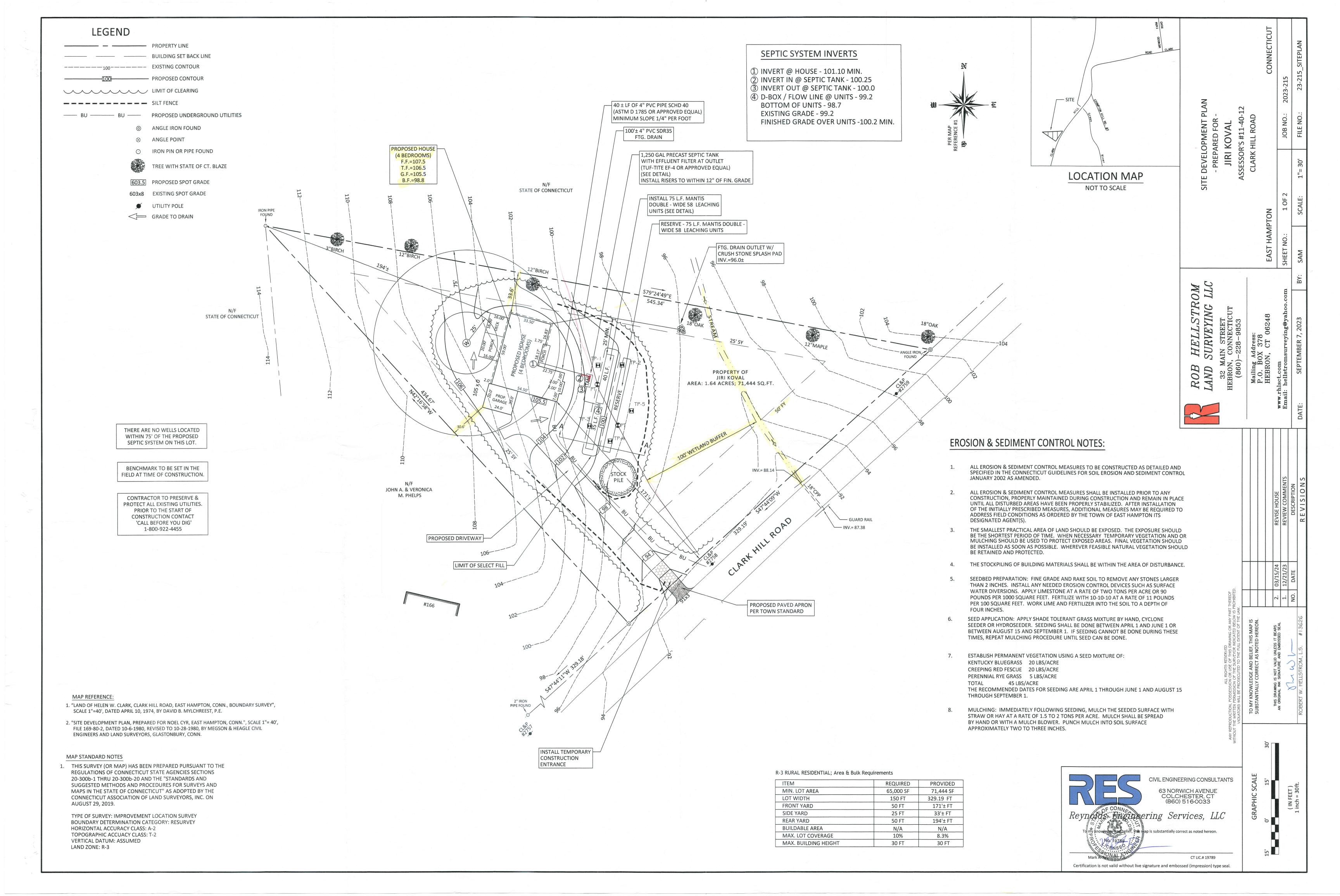
Please check all that are being submitted:
Completed Application Form (4 Pages) Fee Paid Site Plan (Showing project location, extent of wetlands, dimensions, etc) – PDF & 4 Copies of 11 x 17s PDF & 4 CopiesProject Narrative – PDF & 4 Copies of 11 x 17s Soils Report (As Required) Stormwater Report (As Required) Completed Application Checklist (Page 3 of Application) Schedule a Site Visit with Planning & Zoning Official at time of Application Date of Site Visit:
Date of Site Visit:
I certify that this application is complete:
Signature of Applicant: Date:
The Agency reserves the right to add additional requirements in accordance with the Regulations.  Only Complete Application Packages Will Be Accepted

Office Use Only Fee Paid 135 Crtf 02	Date Approved	Permit Number
Public Hearing: YES NO	Agent Approval: YES NO	Permit Number

# TOWN OF EAST HAMPTON INLAND WETLANDS & WATERCOURSES AGENCY

Date: 4/29/24			
1. Name of Applicant* <u>JIRI KOVAL</u> Phone Numbers: Home Home Address: Street 70 BIRCHWOOD DO Business Address: Street	Email: PRO	OFB(6) CONCAST	NET
Phone Numbers: Home	Business	Cell	860 989 1297
Home Address: Street 70 BIRCHWOOD DO	Z Town M	IDDUETOWN State	Zin CT 06757
Business Address: Street	Town	State	/Zip
* All applications MUST list contact phone numb	ers If the applicant is	a Limited Liability Corr	poration or a Corporation
provide the managing member's or responsible of			
provide the managing member of a responsible of		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2. Name of Property Owner (if different from	Applicant):	Pho	one
<ol><li>Name of Property Owner (if different from Address: Street</li></ol>	Town	Sta	te/Zip
As the legal owner of the property listed o	n this application I h	nereby consent to th	e proposed activities.
I hereby authorize the members and agen			
times, during the pendency of the application	tion and for the life	of the permit.	
Printed Name: JIRI KOVAC	, Signature:	1	, Date:
-			
3. Provide the applicant's interest in the land	J		
			. 3
4. Site Location and Description: Assessor's Address: Street Clark Hill Rd	s Map 💛	, Block 90	, Lot
Address: Street Clark Hill Rd	Town Ea	st Homoton Sta	te/Zip CT 06424
Note: It is the applicant's responsibility to provide	e tne correct site addres	rs, тар, рюск, апа ют п	umber for the legal notice.
Provide a description of the land in suffic			
watercourses, the area(s) (in acres or squar	e feet) of wetlands of	or watercourses to be	disturbed, soil type(s),
and wetland vegetation.			
Area of Wetland to be disturbed:	-0-	acres or sq. ft.	
Area of Watercourse to be disturbed	-0-	_acres or sq. ft.	
Area of Upland Review Area to be disturbed:	0.1	_ecres or sq. ft.(Area	a within 100' of wetland)
TOTAL AREA OF DISTURBANCE	0.1	_acres or sq. ft.	
Will fill be needed on site? Yes No		is needed? 50	
The property contains (circle one or more) WETLANDS, BROOK, RIVER, INTERMITTAL			wetlends/2
WETLANDS, BROOK, RIVER, INTERMITTA	NT STREAM, VERNA	AL POOL, SWAMP, C	THERK
Description of soil Description of	l types	on	site:
Description of	wetland		vegetation: _
Description of Name of Soil Scientist and date of survey:			
5. Attach a written narrative of the purpose	and description of the	e proposed activity ar	nd proposed erosion and
sedimentation controls, best management p	ractices, and mitigati	ion measures which	may be considered as a
condition of issuing a permit for the proposed			
(1) prevent or minimize pollution or oth	er environmental d	lamage, (2) maintai	n or enhance existing
environmental quality, or (3) in the following			
watercourse resources. Depending on the			
operations, drainage computations with pre-	and post construct	ion runoff quantities	and runoff rates, plans
clearly showing the drainage areas corresp	onding to the draina	age computations, ex	disting wetland inventory
and functional assessment, soils report, c	onstruction plans si	gned by a certified	soils scientist, licensed
surveyor, and licensed professional engine	er. Include a constr	uction schedule, imp	pacts to vegetation, and
pictures that clearly show the existing conditi	ons of all areas to be	disturbed and/or clea	ared of vegetation.
6. Provide information of all alternatives	considered. List all	alternatives which v	vould cause less or no
environmental impact to wetlands or waterco			et forth in the application
was chosen. All such alternatives shall be di	agramed on a site pla	an or drawing.	

Attach plans showing all alternatives considered.  (SEE ATTACHED) Grading, excavation, and fill are required  to construct a portion of the Septic System and frothing draw attlet in
7. Attach a site plan showing the proposed activity and existing and proposed conditions in relation to wetlands and watercourses and identifying any further activities associated with, or reasonably related to, the proposed regulated activity which are made inevitable by the proposed regulated activity and which may have an impact on wetlands or watercourses. Include a colored grading plan showing areas to be filled (green) and areas to be excavated (brown) that clearly shows existing and proposed contours and proposed limits of disturbance.
8. Attach the names and mailing addresses of adjacent landowners. Attach additional sheets if necessary.  Name State of CT Address 79 Flan ST, Hartford, CT Ologo Name M Cabe, Keylol Address 166 Clare Hill PA, Fast Haptorift 0642  Name Address
9. Attach a completed DEEP reporting form. The Agency shall revise or correct the information provided by the applicant and submit the form to the Commissioner of Environmental Protection in accordance with section 22a-39-14 of the Regulations of Connecticut State Agencies.
10. Attach the appropriate filing fee based on the fee schedule in Section 19 of the regulations.  Fee: _ (Make check payable to "The Town of East Hampton")
11. Name of Erosion Control Agent (Person Responsible for Compliance):,    TIRI KOVAL
12. Are you aware of any wetland violations (past or present) on this property? YES NO  If yes, explain
13. Are you aware of any vernal pools located on or adjacent (within 500')to the property? YES NO
14. For projects that do not fall under the ACOE Category 1 general permit – Have you contacted the Army Corps of Engineers? YES
15 Is this project within a public water supply aquifer protection area or a public water supply watershed area? YES NO If so, have you notified the Commissioner of the Connecticut Department of Public Health and the East Hampton WPCA? YES NO NA (Proof of notification must be submitted with your application.)
16. PUBLIC HEARINGS ONLY. The applicant must provide proof of mailing notices to the abutters prior to the hearing date.
17. As the applicant I am familiar with all the information provided in the application and I am aware of the penalties for obtaining a permit through deception or through inaccurate or misleading information.  Printed name: JRI KOVAL , Signature:



## **SOILS INFORMATION**

#### TEST PIT DATA September 19, 2022

James G. Karrenberg R.S., Chatham Health District jason Reynolds, Reynolds Engineering Services

### TP#1

0-7" Topsoil 7-29" Brown Fine Sandy Loam 29-75" Grey Fine Sandy Loam, Hardpan Mottles: 29" Groundwater: None Ledge: None

#### TP#2

Roots: 29"

0-5" Topsoil 5-25" Brown Fine Sandy Loam 25-75" Compact Grey Loamy Sand Mottles: 25" Groundwater: 68" Ledge: None Roots: 19"

#### <u>TP#3</u>

0-9" Topsoil 9-33" Brown Fine Sandy Loam 33-63" Grey Fine Sandy Loam, Hardpan Mottles: 33" Groundwater: None Ledge: None Roots: 43"

#### TP#4

0-5" Topsoil 5-19" Brown Fine Sandy Loam 19-30" Olive Grey Fine Sandy Loam 30-78" Grey Fine Sandy Loam, Hardpan Mottles: 30" Groundwater: None Ledge: None

#### TP#5

Roots: 19"

0-5" Topsoil 5-11" Dark Brown Fine Sandy Loam 11-18" Olive Grey Fine Sandy Loam 18-78" Grey Fine Sandy Loam, Hardpan Mottles: 18" Groundwater: 60" Ledge: None Roots: 5'

#### MINIMUM LEACHING SYSTEM SPREAD (MLSS) CALCULATIONS:

Receiving Soil Depth: 27" (Average)

Slope: 4.1- 6.0% Hvdraulic Factor: 34 Flow Factor: 4 Bedrooms: 1.75 Percolation Factor: 1.25

MLSS:  $34 \times 1.75 \times 1.25 = 75 LF$ 

#### (PRIMARY - 9/28/2022) HOLE DEPTH: 22"

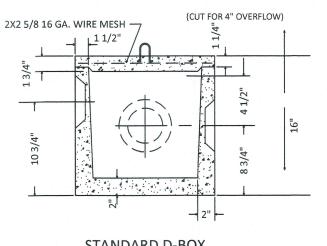
TIME DEPTH  1:40 10 PRESOAK (52  2:38 9 1/2" START TEST  2:43 12 1/2"  2:48 13 1/4"  2:53 14"  2:58 14 3/4"  3:08 16"  3:18 16 3/4"  3:28 17/1/2"	MIN - DRY)
2:38 9 1/2" START TEST 2:43 12 1/2" 2:48 13 1/4" 2:53 14" 2:58 14 3/4" 3:08 16" 3:18 16 3/4" 3:28 17/1/2"	MIN - DRY)
2:43	
2:48	
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2:58	
3:08 16" 3:18 16 3/4" 3:28 17/1/2"	
3:18 16 3/4" 3:28 17/1/2"	
3:28 17/1/2"	
3:38 18"	
3:48 18 1/2"	
3:58 19 "	
4:08 19 1/2"	
4:18 20" (DRY)	

#### PERC RATE: 20 min./inch

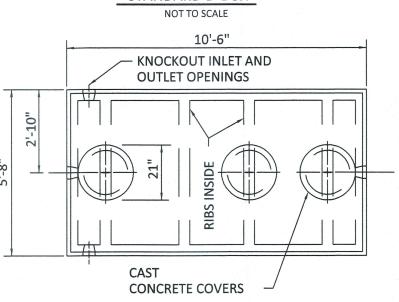
#### (RESERVE - 9/28/2022) HOLE DEPTH: 16"

TIME	DEPTH	
2:31	8"	PRESOAK (20 MIN - DRY)
2:50	5"	START TEST
2:55	8"	
3:00	10 1/4"	
3:05	11 3/4"	
3:10	12 3/4"	
3:15	13 1/2"	
3:20	14 1/2"	
3:23	DRY	

PERC RATE: 4 min./inch

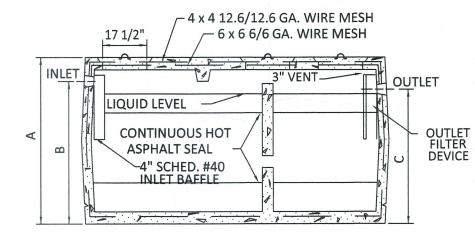


## STANDARD D-BOX



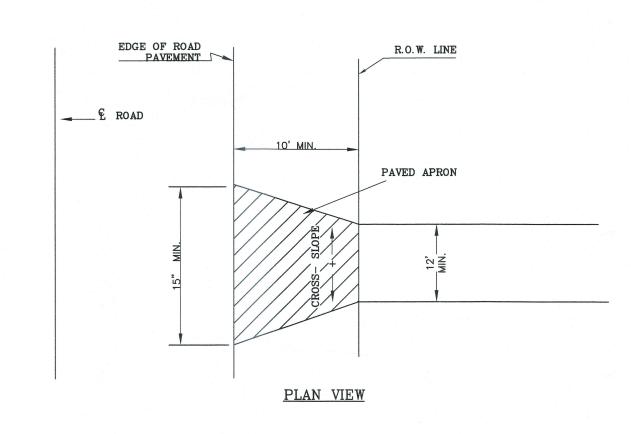
#### PLAN

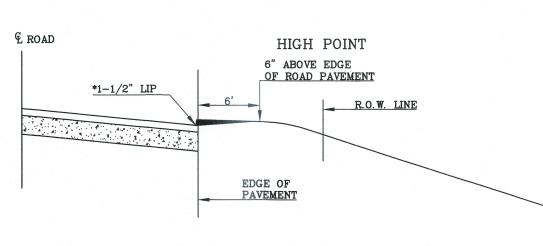
CAPACITIES	Α	В	С
1250 GAL	61"	51"	48"
1500 GAL	69"	59"	56"



**CROSS SECTION** 

1250/1500 GALLON 2 COMPARTMENT SEPTIC TANK NOT TO SCALE





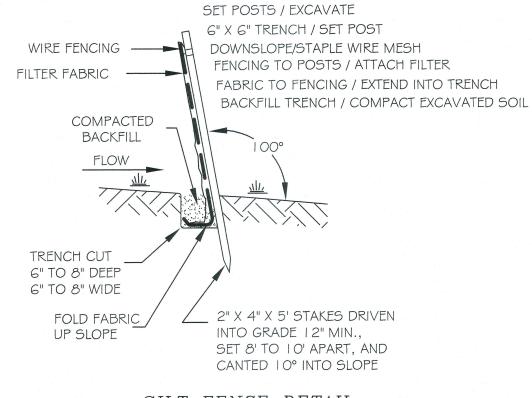
CREST CURVE IN DRIVE

# TYPICAL DRIVEWAY ENTRANCE DETAIL

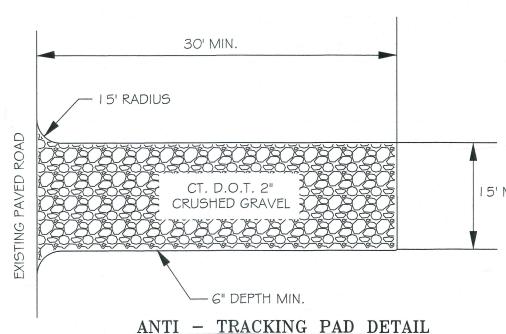
NOT TO SCALE

#### NOTES:

- 1.) Saw cut irregular pavement edge to match drive apron. \*2.) Provided 1-1/2 inch lip only edge on aprons that abut roads that are curbed.
- 3.) Driveways must be greater than or equal to 12'. 4.) Driveway aprons must be no greater than 30'.
- 5.) The first 30' of all driveways may not exceed a grade of 3%.
- 6.) Any driveway that exceeds a grade of 10% must be paved.



#### SILT FENCE DETAIL (NOT TO SCALE)



ANTI - TRACKING PAD DETAIL

NOT TO SCALE

#### **DESIGN NOTES:**

ALL CONSTRUCTION TO CONFORM TO STANDARDS OF THE CONNECTICUT PUBLIC HEALTH CODE AND TO THE SATISFACTION OF THE TOWN SANITARIAN.

REQUIRED LEACHING AREA FOR 4 BEDROOM BUILDING = 787.50 SF ELA

- PERCOLATION RATE FOR DESIGN: 20.0 min./inch
- **DEPTH TO RESTRICTIVE LAYER: 25"**
- DESIGN: USE 75 LF OF MANTIS DOUBLE WIDE 58 LEACHING UNITS ELA PROVIDED = 11.6 SF/LF x 75 LF = 870.0 SF ELA
- THIS SYSTEM HAS NOT BEEN DESIGNED FOR THE USE OF LARGE CAPACITY (+100 GALLONS), DISCHARGE TYPE BATHTUBS. RESIDENTIAL GARBAGE DISPOSALS ARE NOT ANTICIPATED FOR THIS DESIGN. IN THE EVENT THAT SUCH AN INSTALLATION IS CONTEMPLATED FOR THE PROPOSED HOUSE, A LARGER SEPTIC TANK AND INCREASED LEACHING FIELD CAPACITY WILL BE REQUIRED.
- THE DESIGN SHOWN HEREON CONFORMS TO ALL APPLICABLE STATE AND LOCAL HEALTH CODE REQUIREMENTS AND TO GOOD ENGINEERING PRACTICE. I CAN NOT GUARANTEE AGAINST FAILURE DUE TO IMPROPER INSTALLATION, IMPROPER MAINTENANCE OR TO NATURAL PHENOMENA BEYOND THE SCOPE OF NORMAL FIELD INVESTIGATION.

# **SEPTIC SYSTEM CONSTRUCTION NOTES:**

- CONSTRUCTION SEQUENCE
- A. STRIP & STOCKPILE TOPSOIL FROM LEACHING AREA.
- B. CONSTRUCT LEACHING UNITS TO DESIGN LINE & GRADE. D. LOAM, FINE GRADE TO FINISHED GRADE AND SEED. PROTECT DISTURBED AREAS WITH EROSION CONTROLS UNTIL FIRST MOWING.
- 2. THE PIPE BETWEEN THE HOUSE AND SEPTIC TANK SHALL BE 4 IN. EXTRA HEAVY CAST IRON, DUCTILE IRON OR EXTRA STRENGTH PVC ASTM D1785 SCHD 40 OR APPROVED EQUAL.
- 3. ALL DISTRIBUTION PIPE IS TO BE ASTM D3034 SDR 35 (4"PVC) OR APPROVED EQUAL UNLESS NOTED.
- 4. SEPTIC TANK SHALL BE SET LEVEL ON A MINIMUM OF 6" OF PROCESSED GRAVEL OR BROKEN STONE ON
- 5. THERE ARE NO APPARENT WELLS OR SEPTIC FIELDS WITHIN 75' OF THE PROPOSED WELL AND SEPTIC SYSTEM AS SHOWN ON THIS PLAN.
- 6. APPROVED STONE AGGREGATE FOR LEACHING TRENCHES SHALL BROKEN STONE, CRUSHED STONE, OR SCREENED GRAVEL MEETING CT DOT FROM 814A SPECIFICATION FOR M.01.01 FOR NO. 4 STONE:

SIEVE SIZE	PERCENT PASSING (BY WEIGHT)	
2-INCH	100	
1-1/2-INCH	90-100	
1-INCH	20-55	
3/4-INCH	0-10	
3/8-INCH	0-5	
#40	0-3	
#200	0-1.5	

- 7. THE DEPTH OF THE LEACHING UNITS SHALL NOT EXCEED 7" INTO ORIGINAL GRADE.
- 8. THE LOCATION AND ELEVATION OF THE PROPOSED SEPTIC SYSTEM SHALL BE STAKED IN THE FIELD BY A LICENSED LAND SURVEYOR. BENCHMARK TO BE SET IN THE VICINITY OF THE LEACH FIELD AT THE TIME OF

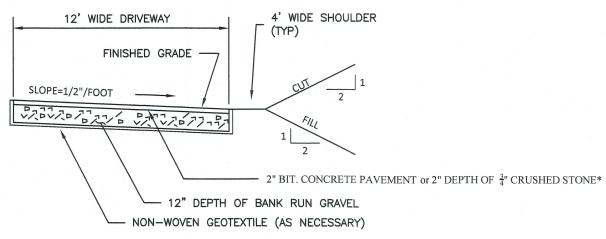
#### LEACHING SYSTEM CONSTRUCTION NOTES:

- 1. TOPSOIL TO BE STRIPPED OFF PRIOR TO FILLING. FILL MATERIAL BETWEEN AND BEYOND TRENCHES TO BE PERVIOUS, GOOD QUALITY AND CLEAN MEDIUM SAND (SELECT FILL) PLACED AND COMPACTED IN 6" LIFTS. SELECT FILL SHALL MEET THE FOLLOWING MINIMUM REQUIREMENTS:
- A. THE FILL SHALL NOT CONTAIN ANY MATERIAL LARGER THAN 3 INCHES. B. THE FILL SHALL NOT CONTAIN MORE THAN 45 PERCENT GRAVEL (GRAVEL IS BETWEEN NO. 4 & 3" SIEVES) NO MORE THAN 45 PERCENT OF THE MATERIAL CAN BE RETAINED ON THE NO. 4 SIEVE. C. THE FILL LESS THE GRAVEL SHALL MEET THE FOLLOWING GRADATION CRITERIA:

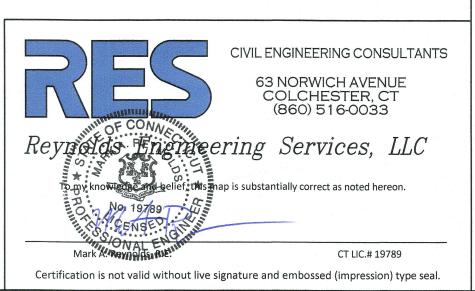
#4 #10 #40 #100 #200 % PASSING: WET SEIVE 100 70-100 \*\*10-50 0-20 0-5 % PASSING: DRY SEIVE 100 70-100 10-75 0-5 0-2.5

TO BE DISTURBED.

- \*\* PERCENT PASSING THE #40 SIEVE CAN BE INCREASED TO NO GREATER THAN 75% IF THE PERCENT PASSING THE #100 SIEVE DOES NOT EXCEED 10% AND THE #200 SIEVE DOES NOT EXCEED 5%.
- 2. DOCUMENTATION OF TEST RESULTS ARE TO BE PROVIDED TO THE HEALTH DISTRICT
- 3. FILL MATERIAL TO BE PLACED PRIOR TO TRENCH EXCAVATION. NO TRAFFIC OTHER THAN TRACK-DRIVEN EQUIPMENT IS TO CROSS, DUMP, UNLOAD OR OTHERWISE COMPACT THE FILL AREA AFTER TOPSOIL REMOVAL. FILL MATERIAL TO BE DUMPED AT THE EDGE OF THE STRIPPED AREA AND SPREAD AND COMPACTED WITH TRACK-DRIVEN VEHICLES. STOCKPILING IS TO TAKE PLACE UPGRADIENT OF THE LEACHING AREA. THE AREA DOWN GRADIENT OF THE LEACHING AREA IS NOT



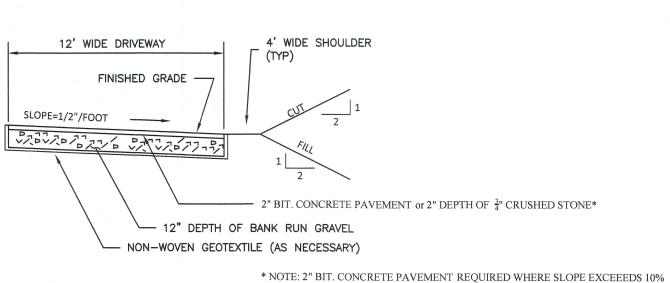
NOT TO SCALE



# HELLSTR( SURVEYING ROB LAND

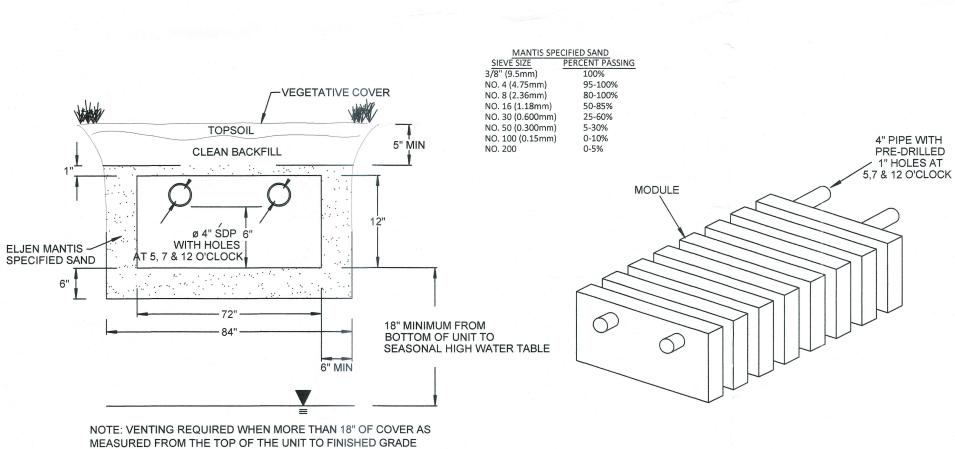
NOTES & DETAIL
- PREPARED FOR
JIRI KOVAL
ASSESSOR'S #11-40
CLARK HILL ROAI

OM



DRIVEWAY INSTALLATION DETAIL





MANTIS DOUBLE WIDE 58 LEACHING UNIT DETAIL

