



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:
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✓ C	ompleted Application Form (3 Pages)
	ee Paid
Pı	ite Plan (Showing project location, extent of wetlands, dimensions, etc) – 10 Copies roject Narrative – 10 Copies
	oils Report (As Required) tormwater Report (As Required)
St	tate Reporting Form (Filled in to extent possible) ompleted Application Checklist (Page 3 of Application)
S	chedule a Site Visit with Planning & Zoning Official at time of Application
I cer	tify that this application is complete:
Sign	nature of Applicant: Celly Date: 5/26/20
The A	Agency reserves the right to add additional requirements in accordance with the Regulations.

1 Community Dr., East Hampton, CT 06424 | 860.267.7450 tel

Only Complete Application Packages Will Be Accepted

| www.easthamptonct.gov

1	Office Use Only	,					۱ .سید.		
	Fee Paid Public Hearing:		Date Appro		Pe	rmit Numbe	r_LW-	20-017	
l	Fublic Healing.	TES NO	Agent App	proval: YES N	10	e de			
			1WOT	N OF EAST H	HAMPTON		ECE	11 - A	
	-1-1	INLA	ND WETLAN	DS & WATE	RCOURSE	S AGENC	YMAY 2	6 2020	
Date:	5/26/20)					the second	V	
1. Nar	ne of Applicant	* Kelly	FOSTER			4	04	00 40	
Phone	Numbers: Hor	ne 860 6	48-1742	_, Business	Ca\. I.	7, (Cell 860	-995-54	23
	ss Address: St		TER STREET		wn <u>Southu</u> wn		tate/Zip <u>C</u> tate/Zip	F06074	-
			ct phone number			ed Liability (Corporation	or a Corporati	_ ion
provide	the managing m	ember's or	responsible corp	orate officer's r	name, address	s, and teleph	none numbe	er a corporati er.	on,
2. Nan	ne of Property	Owner (if o	different from A	pplicant):			Phone 86	0995-542	3
Addres	s: Street 29	WAN60	NKTRATI	Town_ <u>{</u>	CAST HAMY	DTON	State/Zip	CT MG41	4
As the	legal owner o	f the prop	perty listed on	this applicati	on I hereby	consent t	o the prop	osed activiti	es.
times.	during the ne	ndency of	ers and agent the application	s of the Age	ncy to inspi	ect the su	bject land	i, at reasona	ble
Printed	Name: (2)	4 Faster	K	, Signature:_	Kelly	GIIII.	, Date	e:5/26/2	U
			est in the land.		A 1	-	an and	M(A) = 0 = 0	#12 A
									sting Deck
4. Site	Location and [Description	n: Assessor's N	//ap_ <u>09A</u>	, Block	700	, Lot	27	
Addres	s: Street 29	WANGO	ONK TRAI	Town	EAST HAY	MPTON	State/Zip <	CT 0642'	1
Provide	a description	of the	oility to provide the land in sufficie	e correct site at ent detail to	allow identif	ication of	the inland	or the legal notice.	ce.
waterco	ourses, the are	a(s) (in ac	cres or square	feet) of wetlar	nds or water	courses to	be disturb	ped. soil type	inu (s).
and we	tland vegetation	n.						, ca, ca,po.	(0),
	Wetland to be					or sq. ft.			
	Watercourse to			1:40 - 1		or sq. ft.			
	Upland Review TOTAL AREA			10 50			rea within	100' of wetlar	nd)
	be needed on s			yes, how much		or sq. ft.		cubic yards	
	perty contains			you, now mad	on milits need	eu:		cubic yards	
WETLA	NDS, BROOK,		NTERMIŤTANT	ΓSTREAM, VI	ERNAL POC	L, SWAMF	P, OTHER	SHOW	
Descrip	otion	of	soil		pes	on		site: Dict	
Descrip				wetland				vegetation: 6	rass, Shrut
ivame o	of Soil Scientist	and date	of survey:						
5. Atta	ch a written na	rrative of t	the purpose an	d description	of the propos	end activity	and prope	acad arasian	and
sedime	ntation controls	s, best ma	anagement prac	ctices, and mi	tigation mea	sures which	th may be	considered s	anu as a
conditio	n of issuing a p	permit for t	he proposed re	gulated activit	y including b	ut not limit	ed to: mea	sures to:	
(1) pre	event or minin	nize pollu	ution or other	environment	al damage,	(2) main	itain or e	enhance exis	ting
environ	mental quality,	or (3) in t	he following or	der of priority:	restore, enh	nance or co	reate produ	uctive wetland	d or

(1) prevent or minimize pollution or other environmental damage, (2) maintain or enhance existing environmental quality, or (3) in the following order of priority: restore, enhance or create productive wetland or watercourse resources. Depending on the complexity of the project, include the following: sequence of operations, drainage computations with pre and post construction runoff quantities and runoff rates, plans clearly showing the drainage areas corresponding to the drainage computations, existing wetland inventory and functional assessment, soils report, construction plans signed by a certified soils scientist, licensed surveyor, and licensed professional engineer. Include a construction schedule, impacts to vegetation, and pictures that clearly show the existing conditions of all areas to be disturbed and/or cleared of vegetation.

6. Provide information of all alternatives considered. List all alternatives which would cause less or no environmental impact to wetlands or watercourses and state why the alternative as set forth in the application was chosen. All such alternatives shall be diagramed on a site plan or drawing.

Attach plans showing all alternatives considered.
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
Name Address 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): CLY - MCNGNY Dead ASSIGNE LLC Phone Numbers: Home, Business 860-298-6475 Cell 860-916-7939 Address: Street 1800 120 120 Town Wentburg 459
12. Are you aware of any wetland violations (past or present) on this property? YES (IV)
13. Are you aware of any vernal pools located on or adjacent (within 500')to the property? YES
14. For projects that do not fall under the ACOE Category 1 general permit – Have you contacted the Army Corps of Engineers? YES NO
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 (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: You or a representative must attend the Inland Wetlands meeting to present you application.