

Office Use Only

Fee Paid _____

Date Approved _____

Permit Number

1W-19-051

Public Hearing: YES NO

Agent Approval: YES NO

TOWN OF EAST HAMPTON
INLAND WETLANDS & WATERCOURSES AGENCY



Date: 11/13/19

1. Name of Applicant* Town of East Hampton
Phone Numbers: Home _____, Business 860-267-7300, Cell _____

Home Address: Street _____ Town _____ State/Zip _____

Business Address: Street 20 East High St Town E. Hampton State/Zip CT 06424

* All applications MUST list contact phone numbers. If the applicant is a Limited Liability Corporation or a Corporation, provide the managing member's or responsible corporate officer's name, address, and telephone number.

2. Name of Property Owner (if different from Applicant): Princess Pocotopaus Assoc Phone _____

Address: Street PO Box 41 Town E. Hampton State/Zip CT 06424

As the legal owner of the property listed on this application I hereby consent to the proposed activities. I hereby authorize the members and agents of the Agency to inspect the subject land, at reasonable times, during the pendency of the application and for the life of the permit.

Printed Name: _____, Signature: _____, Date: _____

3. Provide the applicant's interest in the land. _

4. Site Location and Description: Assessor's Map 09A, Block 700, Lot 12
Address: Street South Wangank Trail Town E. Hampton State/Zip CT 06424

Note: It is the applicant's responsibility to provide the correct site address, map, block, and lot number for the legal notice. Provide a description of the land in sufficient detail to allow identification of the inland wetlands and watercourses, the area(s) (in acres or square feet) of wetlands 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: 0.025 acres or sq. ft. (Area within 100' of wetland)
TOTAL AREA OF DISTURBANCE 0.025 acres or sq. ft.

Will fill be needed on site? Yes No If yes, how much fill is needed? _____ cubic yards

The property contains (circle one or more) WETLANDS, BROOK, RIVER, INTERMITTANT STREAM, VERNAL POOL, SWAMP, OTHER _____

Description of soil types on site: _____
Description of wetland vegetation: _____

Name of Soil Scientist and date of survey: NIA

5. Attach a written narrative of the purpose and description of the proposed activity and proposed erosion and sedimentation controls, best management practices, and mitigation measures which may be considered as a condition of issuing a permit for the proposed regulated activity including but not limited to; measures to:

(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.

None 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 See Attached list Address _____
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): _____
Phone Numbers: Home _____, Business _____
Cell _____ Address: Street _____ Town _____
State/Zip _____

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 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: Jimmy Hall, Signature: [Signature], Date: 11/14/12

Please Note: You or a representative must attend the Inland Wetlands meeting to present your application.

Parcel ID	Owner 1	Owner Address	Owner City	Owner State	Owner Zip	Site Address
09A-70C-15	CALDWELL STEVEN W	43 FOX MEADOW	MARLBOROUGH	CT	6442	7 SOUTH WANGONK TR
09A-70C-260	CURTIS JAMES JR +	1 WANGONK TRL	EAST HAMPTON	CT	6424	1 WANGONK TR
09A-70C-5	DAVIS ROBERT C + CHERYL A	259 INJUN HOLLOW RD	EAST HAMPTON	CT	06424-3023	11 SOUTH WANGONK TR
09A-74-254	PALMA FRANCIS M + JENNIFER H	3 WANGONK TRL	EAST HAMPTON	CT	6424	3 WANGONK TR
09A-70C-6	PRINCESS POCOTOPAUG ASSOC INC	PO BOX 41	EAST HAMPTON	CT	6424	SOUTH WANGONK TR
09A-70C-12	PRINCESS POCOTOPAUG ASSOC INC	PO BOX 41	EAST HAMPTON	CT	6424	SOUTH WANGONK TR
09A-70C-261	RIEDINGER DAN R	11 SCOVILLE LANDING RD	MOODUS	CT	06469-1047	8 SOUTH WANGONK TR