Office Use Only Fee Paid	Date Approved	Permit Number	IW-20-009		
Public Hearing: YES NO	Agent Approval: YES NO				

TOWN OF EAST HAMPTON INLAND WETLANDS & WATERCOURSES AGENCY

Date: 4-14-2020		
1. Name of Applicant* Peter + Sheila E	Engel	860989 4004 Sheila
Phone Numbers: Home 860-267-6347 , Busi	iness	. Cell 860 202 5184 Peter
Home Address: Street 11 Markham rd.	Town E. Hamaton	State/Zip cr 06424
Business Address: Street	Town	State/Zip
* All applications MUST list contact phone numbers. If th	e applicant is a Limited Lia	bility Corporation or a Corporation.
provide the managing member's or responsible corporate of	fficer's name, address, and	telephone number.
2. Name of Property Owner (if different from Applican	·••	Dhana
	Town	Phone State/Zip
As the legal owner of the property listed on this a	onlication I hereby cons	ent to the proposed activities
I hereby authorize the members and agents of the	phication i heleby cons le Adency to inspect th	ne subject land at resconship
times, during the pendency of the application and	for the life of the permit	e subject iailu, at leasonable
Printed Name: Peter Engel JR , Signi	ature: Perfect (or C)	STL Date: 4-14-2020
	Shelo pae	
3. Provide the applicant's interest in the land.	Jarose P W	
<u>٥</u> ٠	- HEE	
4. Site Location and Description: Assessor's Map	35 , Block 9	L, Lot 2 ~ 3A
Address: Street & Markham rd	Town East Hampl	TO State/7in / T /26424
Note: It is the applicant's responsibility to provide the corre	ct site address, map, block,	and lot number for the legal notice.
Provide a description of the land in sufficient de	tail to allow identificatio	n of the inland wetlands and
watercourses, the area(s) (in acres or square feet) of	f wetlands or watercours	es to be disturbed, soil type(s),
and wetland vegetation.	•	
Area of Wetland to be disturbed:	acres or sq	
Area of Watercourse to be disturbed	acres or sq	
Area of Upland Review Area to be disturbed: 5	700 to acres or sq	. ft.(Area within 100' of wetland)
TOTAL AREA OF DISTURBANCE	5700 to acres or se	
Will fill be needed on site? (Yes) No If yes, h The property contains (circle one or more)	ow much fill is needed?_	Zoo cubic yards
WETLANDS BROOM, RIVER, INTERMITTANT STRE	EAM MEDNAL DOOL ON	NAME OTHER
Description of soil	types '	
•	tiand .	on site:
Name of Soil Scientist and date of survey:	100 SYXDS V-1	17.(1.8) 10 vegetation
	The Court of the C	10/10/19
5. Attach a written narrative of the purpose and desc	ription of the proposed a	ctivity 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 regulate	d activity including but no	t limited to: measures to:
(1) prevent or minimize pollution or other envir	onmental 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 complex	xity of the project, inclu	ide the following: sequence of
operations, drainage computations with pre and po	st construction runoff qu	antities and runoff rates, plans
clearly showing the drainage areas corresponding to	o the drainage computat	tions, existing wetland inventory
and functional assessment, soils report, constructi	ion plans signed by a c	certified soils scientist, licensed
surveyor, and licensed professional engineer. Include	de a construction sched	ule, 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.

Autor 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. NameAddress
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 Erosjon Control Agent (Person Responsible for Compliance): SHELLA ENGEL Phone Numbers: Home , Business Cell Sco - 989 - 4004 Address: Street 11 Manual Town 241 CT. State/Zip 06424 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: Peler Frae , Signature: Surve Chapter, Date: 4-14-2020 Please Note: You or a representative must attend the Inland Wetlands meeting to present you application.



GIS CODE #:	-					
For DEEP Use Only		 ***************************************	-	-	-	 -

79 Elm Street • Hartford, CT 06106-5127

www.ct.gov/deep

Affirmative Action/Equal Opportunity Employer

Statewide Inland Wetlands & Watercourses Activity Reporting Form

Please complete and mail this form in accordance with the instructions on pages 2 and 3 to: DEEP Land & Water Resources Division, Inland Wetlands Management Program, 79 Elm Street, 3rd Floor, Hartford, CT 06106 Incomplete or incomprehensible forms will be mailed back to the inland wetlands agency.

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	PART I: Must Be Completed By The Inland Wetlands Agency
1.	DATE ACTION WAS TAKEN: year: month:
2.	ACTION TAKEN (see instructions, only use one code):
3.	WAS A PUBLIC HEARING HELD (check one)? yes no
4.	NAME OF AGENCY OFFICIAL VERIFYING AND COMPLETING THIS FORM:
	(print name) (signature)
	PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant
5.	TOWN IN WHICH THE ACTION IS OCCURRING (print name): EAST HAUPTON
	does this project cross municipal boundaries (check one)? yes no
	if yes, list the other town(s) in which the action is occurring (print name(s)):
6.	LOCATION (see instructions for information): USGS quad name: or number:
	subregional drainage basin number: 4750 - 80
7.	NAME OF APPLICANT, VIOLATOR OR PETITIONER (print name): PETER & SHELLA EXCEL
8.	NAME & ADDRESS / LOCATION OF PROJECT SITE (print information): ## # E-ARKHEM PD.
	briefly describe the action/project/activity (check and print information): temporary permanent X description: DRIVEWAY IMPROVEMENT FOR COMBON DRIVE
9.	ACTIVITY PURPOSE CODE (see instructions, only use one code):
10.	ACTIVITY TYPE CODE(S) (see instructions for codes): Z, 3, 9, 12
11.	WETLAND / WATERCOURSE AREA ALTERED (must provide acres or linear feet):
	wetlands: acres open water body: acres stream: linear feet
12.	UPLAND AREA ALTERED (must provide acres): acres
13.	AREA OF WETLANDS / WATERCOURSES RESTORED, ENHANCED OR CREATED (must provide acres): acres
DA	TE RECEIVED: PART III: To Be Completed By The DEEP DATE RETURNED TO DEEP:
FO	ORM COMPLETED: YES NO FORM CORRECTED / COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO