

**Ashford Inland Wetlands and Waterways Commission
5 Town Hall Road, Ashford Connecticut 06278**

Application for Permit

(Land Use Office File # _____)

Property Owner/Applicant: _____

Address: _____

Telephone # _____ - _____ - _____ Mobile # _____ - _____ - _____

Email: _____

Applicant other than Property Owner: _____

Company Name: (If Applicable) _____

Address: _____

Telephone # _____ - _____ - _____ Mobile # _____ - _____ - _____

Email: _____

Name of Certified Soil Scientist (if Applicable): _____

Address: _____

Telephone # _____ - _____ - _____ Email: _____

Description of Property and Location of Wetlands:

- A. Parcel Identification: Tax Map # _____, Block _____, Lot # _____
- B. Street Address of Property: (if Available) _____
- C. Number of Acres: _____
- D. Dimensions of Delineated (Flagged/marked) Wetlands and Watercourses
__ (See Site Plan/Map Attached)

Description of Planned Activity: (Including):

1. Purpose of this activity _____

2. Area of wetland disturbance (Square Feet) _____
3. Amount of wetland soils removed (Cubic Yards) _____
4. Amount of material deposited in wetlands (Cubic Yards) _____
5. Size of upland drainage area, if wetland crossing (Acres) _____
6. Describe the schedule for planned activity _____

7. State, in your opinion, the Wetland impact
 - a. On this property
 - b. On areas adjacent to, or downstream from, this property

Attach Site Plan Specifications, Include the Following:

(Refer to Wetlands Regulation Sec. 5.9e)

- A. North Arrow
- B. Location of Proposed Activity on the Property
- C. Locations of Wetlands/Watercourses with flag numbers
- D. Locations of proposed and/or existing sediment and erosion control measures
- E. Location of proposed and/or existing well and septic system
- F. Abutting property owners and complete boundaries
- G. Name and location of public roads related to property
- H. Proposed access point(s) to property
- I. Existing Structures
- J. Location of any stone walls

Additional Forms and Attachments:

- A. Attach a copy of Soil Scientist's Report
- B. Complete Statewide Inland Wetlands and Watercourses Activity Reporting Form and provide a USGS Topographical Map
(Map available in Town Clerk's Office)
- C. Complete Willimantic Water Works Reporting Form

(This form to be sent by certified mail, with a copy of this application)

TO: Willimantic Water Works
C/O Superintendent
174 Storrs road

Mansfield Center, Ct. 06250

Attach your Return Receipt to the original Application

- D. Notification to an Abutting Town
If activity is within 500 ft of another Town's boundary, you are required to send, by certified mail, a copy of this application to the Wetlands Agency of that town.
Attach your Return Receipt to the original Application
- E. Letter from Eastern Highlands Health District concerning proposed septic system (If Applicable)



STATEWIDE INLAND WETLANDS & WATERCOURSES ACTIVITY REPORTING FORM

Pursuant to section 22a-39(m) of the General Statutes of Connecticut and section 22a-39-14 of the Regulations of Connecticut State Agencies, inland wetlands agencies must complete the Statewide Inland Wetlands & Watercourses Activity Reporting Form for **each** action taken by such agency.

This form may be made part of a municipality's inland wetlands application package. If the municipality chooses to do this, it is recommended that a copy of the Town and Quadrangle Index of Connecticut and a copy of the municipality's subregional drainage basin map be included in the package.

Please remember, the inland wetlands agency is responsible for ensuring that the information provided is **accurate** and that it reflects the **final** action of the agency. Incomplete or incomprehensible forms will be mailed back to the agency. Instructions for completing the form are located on the following pages.

The inland wetlands agency shall mail completed forms for actions taken during a calendar month no later than the 15th day of the following month to the Department of Energy and Environmental Protection (DEEP). Do **not** mail this cover page or the instruction pages. Please mail **only** the **completed** reporting form to:

DEEP Land & Water Resources Division
Inland Wetlands Management Program
79 Elm Street, 3rd Floor
Hartford, CT 06106

Questions may be directed to the DEEP's Inland Wetlands Management Program at (860) 424-3019.

INSTRUCTIONS FOR COMPLETING THE STATEWIDE INLAND WETLANDS & WATERCOURSES ACTIVITY REPORTING FORM

*Use a separate form to report EACH action taken by the Agency. Complete the form as described below.
Do NOT submit a reporting form for withdrawn actions.*

PART I: Must Be Completed By The Inland Wetlands Agency

1. Choose the year and month the Inland Wetlands Agency took the action being reported. If multiple actions were taken regarding the same project or activity then multiple forms need to be completed.
2. Choose ONE code letter to describe the final action or decision taken by the Inland Wetlands Agency. Do NOT submit a reporting form for withdrawn actions. Do NOT enter multiple code letters (for example: if an enforcement notice was given and subsequent permit issued - two forms for the two separate actions are to be completed).
 - A = A Permit Granted by the Inland Wetlands Agency (not including map amendments, see code D below)
 - B = Any Permit Denied by the Inland Wetlands Agency
 - C = A Permit Renewed or Amended by the Inland Wetlands Agency
 - D = A Map Amendment to the Official Town Wetlands Map - or -
An Approved/Permitted Wetland or Watercourse Boundary Amendment to a Project Site Map
 - E = An Enforcement Action: Permit Revocation, Citation, Notice of Violation, Order, Court Injunction, or Court Fines
 - F = A Jurisdictional Ruling by the Inland Wetlands Agency (i.e.: activities "permitted as of right" or activities considered non-regulated)
 - G = An Agent Approval pursuant to CGS 22a-42a(c)(2)
 - H = An Appeal of Agent Approval Pursuant to 22a-42a(c)(2)
3. Check "yes" if a public hearing was held in regards to the action taken; otherwise check "no".
4. Enter the name of the Inland Wetlands Agency official verifying that the information provided on this form is accurate and that it reflects the FINAL action of the agency.

PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant - If Part II is completed by the applicant, the applicant MUST return the form to the Inland Wetlands Agency. The Inland Wetlands Agency MUST ensure that the information provided is accurate and that it reflects the FINAL action of the Agency.

5. Enter the name of the municipality for which the Inland Wetlands Agency has jurisdiction and in which the action/project/activity is occurring.

Check "yes" if the action/project/activity crosses municipal boundaries and enter the name(s) of the other municipality(ies) where indicated. Check "no" if it does not cross municipal boundaries.
6. Enter the USGS Quad Map name or number (1 through 115) as found on the Connecticut Town and Quadrangle Index Map (the directory to all USGS Quad Maps) that contains the location of the action/project/activity. Click on the following website for USGS Quad Map information:
http://ct.gov/deep/lib/deep/gis/resources/Index_NamedQuadTown.pdf

ALSO enter the four-digit identification number of the corresponding Subregional Drainage Basin in which the action/project/activity is located. If the action/project/activity is located in more than one subregional drainage basin, enter the number of the basin in which the majority of the action/project/activity is located. Town subregional drainage basin maps can be found at UConn – CLEAR's website: http://clear.uconn.edu/data/map_set/index.htm
7. Enter the name of the individual applying for, petitioning, or receiving the action.
8. Enter the name and address or location of the action/project/activity. Check if the action/project/activity is TEMPORARY or PERMANENT in nature. Also provide a brief DESCRIPTION of the action/project/activity. It is always best to provide as much information as possible (i.e., don't just state "forestry", provide details such as "20 acre forestry harvest, permit required for stream crossing".)

9. Carefully review the list below and enter ONLY ONE code letter which best characterizes the action/project/activity. All state agency projects must code "N".

- | | |
|---|---|
| A = Residential Improvement by Homeowner | I = Storm Water / Flood Control |
| B = New Residential Development for Single Family Units | J = Erosion / Sedimentation Control |
| C = New Residential Development for Multi-Family / Condos | K = Recreation / Boating / Navigation |
| D = Commercial / Industrial Uses | L = Routine Maintenance |
| E = Municipal Project | M = Map Amendment |
| F = Utility Company Project | N = State Agency Project |
| G = Agriculture, Forestry or Conservation | P = Other (this code includes the approval of |
| H = Wetland Restoration, Enhancement, Creation | concept plans with no-on-the-ground work) |

10. Enter between one and four code numbers to best characterize the project or activity being reported. Enter "NA" if this form is being completed for the action of map amendment. You MUST provide code 12 if the activity is located in an established upland review area. You MUST provide code 14 if the activity is located beyond the established upland review area or no established upland review area exists.

- | | |
|---|--|
| 1 = Filling | 8 = Underground Utilities Only (no other activities) |
| 2 = Excavation | 9 = Roadway / Driveway Construction |
| 3 = Land Clearing / Grubbing (no other activity) | 10 = Drainage Improvements |
| 4 = Stream Channelization | 11 = Pond, Lake Dredging / Dam Construction |
| 5 = Stream Stabilization (includes lakeshore stabilization) | 12 = Activity in an Established Upland Review Area |
| 6 = Stream Clearance (removal of debris only) | 14 = Activity in Upland |
| 7 = Culverting (not for roadways) | |

Examples: Jurisdictional ruling allowing construction of a parking lot in an upland where the municipality does not have an established upland review area must use code 14, other possible codes are 2 and 10. Permitted construction of a free standing garage (residential improvement by homeowner) partially in an established upland review area with the remainder in the upland must use code 12 and 14, other possible codes are 1 and 2.

11. Leave blank for TEMPORARY alterations but please indicate action/project/activity is temporary under question #8 on the form. For PERMANENT alterations, enter in acres the area of wetland soils or watercourses altered. Include areas that are permanently altered, or are proposed to be, for all agency permits, denials, amendments, renewals, jurisdictional rulings, and enforcement actions. For those activities that involve filling or dredging of lakes, ponds or similar open water bodies enter the acres filled or dredged under "open water body". For those activities that involve directly altering a linear reach of a brook, river, lakeshore or similar linear watercourse, enter the total linear feet altered under "stream". Remember that these figures represent only the acreage altered not the total acreage of wetlands or watercourses on the site. You MUST provide all information in ACRES (or linear feet as indicated) including those areas less than one acre. To convert from square feet to acres, divide square feet by the number 43,560. If this report is being completed for an agency jurisdictional ruling and detailed information is not available, provide an estimate. Enter zero if there is no alteration.
12. Enter in acres the area of upland altered as a result of an ACTIVITY REGULATED BY the inland wetlands agency, or as a result of an AGENT APPROVAL pursuant to CGS section 22a-42a(c)(2). Leave blank for TEMPORARY alterations but please indicate action/project/activity is temporary under question #8 on the form. Include areas that are permanently altered, or proposed to be permanently altered, for all agent approvals, agency permits, denials, amendments, renewals, jurisdictional rulings, and enforcement actions. You MUST provide all information in ACRES including those areas less than one acre. See directions above (#11) for conversion factor. If this report is being completed for an agent approval or an agency jurisdictional ruling and detailed information is not available, provide an estimate. Enter zero if there is no alteration.
13. Enter the acres that are, or are proposed to be, restored, enhanced or created for all agency permits, denials, amendments, renewals, jurisdictional rulings and enforcement actions. NOTE restored or enhanced applies to previously existing wetlands or watercourses. Created applies to a non-wetland or non-watercourse area which is converted into wetlands or watercourses (question #10 must provide 12 and/or 14 as an answer, and question #12 must also be answered). You MUST provide all information in ACRES including those areas less than one acre. See directions above (#11) for conversion factor. Enter zero if there is no restoration, enhancement or creation.

PART III: To Be Completed By The DEEP - Please leave this area blank. Incomplete or incomprehensible forms will be mailed back to the inland wetlands agency.



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.

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): _____
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: _____
7. NAME OF APPLICANT, VIOLATOR OR PETITIONER (print name): _____
8. NAME & ADDRESS / LOCATION OF PROJECT SITE (print information): _____
briefly describe the action/project/activity (check and print information): temporary permanent description: _____
9. ACTIVITY PURPOSE CODE (see instructions, only use one code): _____
10. ACTIVITY TYPE CODE(S) (see instructions for codes): _____, _____, _____, _____
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

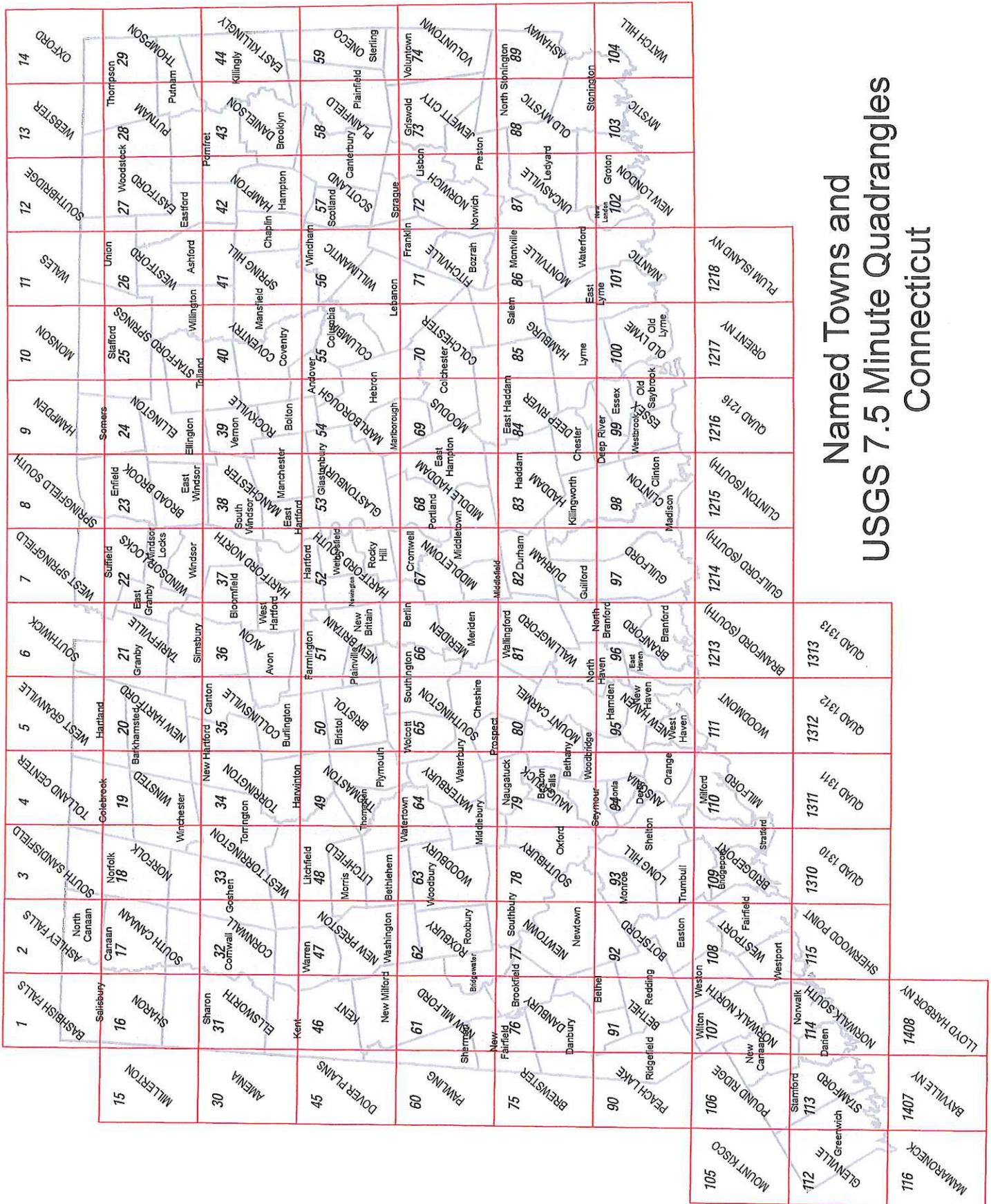
DATE RECEIVED:

PART III: To Be Completed By The DEEP

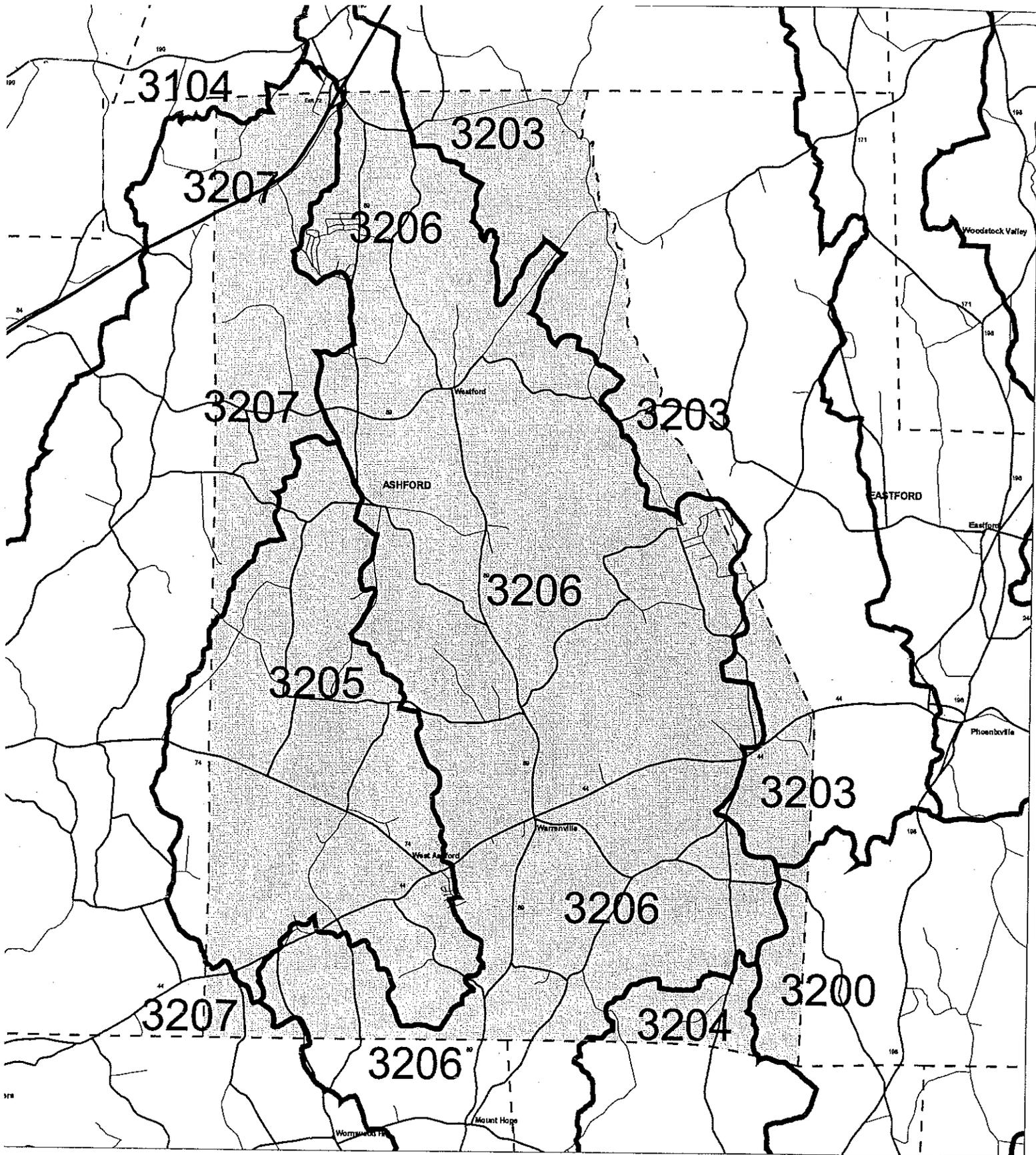
DATE RETURNED TO DEEP:

FORM COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO



Named Towns and USGS 7.5 Minute Quadrangles Connecticut



SUBREGIONAL DRAINAGE BASINS

Statewide Inland Wetlands & Watercourses Activity Reporting Program

**Ashford,
Connecticut**

-  Subregional Basin
-  Main Road
-  Local Road
-  Town

0 0.5 1 1.5 2 Miles

July, 2000
DEP Inland Water Resources Division
Wetlands Management Section



Watershed or Aquifer Area Project Notification Form

REQUIREMENT:

Within seven days of filing, all applicants before a municipal Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for any project located within a public water supply aquifer or watershed area are required by Public Act No. 06-53 of the CT General Statutes to notify The Commissioner of Public Health and the project area Water Company of the proposed project by providing the following information.

To determine if your project falls within a public water supply aquifer or watershed area visit the appropriate town hall and look at their *Public Drinking Water Source Protection Areas* map. If your project falls completely within or contain any part of a public water supply aquifer or watershed you are required to complete the following information.

Note: You will need information obtained from the *Public Drinking Water Source Protection Areas* map located in the appropriate town hall to complete this form.

Step 1: Have you already notified the CT Department of Public Health (CTDPH) of this project?

- No, Go to Step 2
- Yes, I have notified DPH under a different project name - Complete steps 4-6
- Yes, same name different year - Notification Year Complete steps 4-6

Step 2:

1. Name of public water supply aquifer your project lies within:
2. Name of the public water supply watershed your project lies within:
3. Public Water Supply Identification number (PWSID) for the water utility:

Step 3: For 1-5 Check all that apply

1. My project is proposing:

- Industrial use; Commercial use; Agricultural use; Residential use;
- Recreational use; Transportation improvements; Institutional (school, hospital, nursing home, etc.);
- Quarry/Mining; Zone Change, Please Describe:
- Other, Please describe:

2. The total acreage of my project is:

- Less than or equal to 5 acres Greater than 5 acres

3. My project site contains, abuts or is within 50 feet of a:

- Wetland; Stream; River; Pond or Lake

4. Existing use of my project site is:

- Grassland/meadow; Forested; Agricultural; Transportation; Institutional (school, hospital, nursing home, etc.); Residential; Commercial; Industrial; Recreational; Quarry/Mining
- Other Please Describe: _____

5. My project will utilize:

- septic system; existing public sewer; new public sewer; agricultural waste facility;
- existing private well; new private well; existing public water supply;
- new public water supply, if new have you applied for a certificate of public convenience and necessity from DPH? Yes No

6. My project will contain this percentage of built up area (buildings, parking, road/driveway, pool): Less than or equal to 20% Greater than 20% to 50% Greater than 50%

Step: 4 Applicants Contact Information:

Name: _____

E-mail address: _____

Telephone: _____

Fax number: _____

Step 5: Please provide the following if available:

Project name: _____

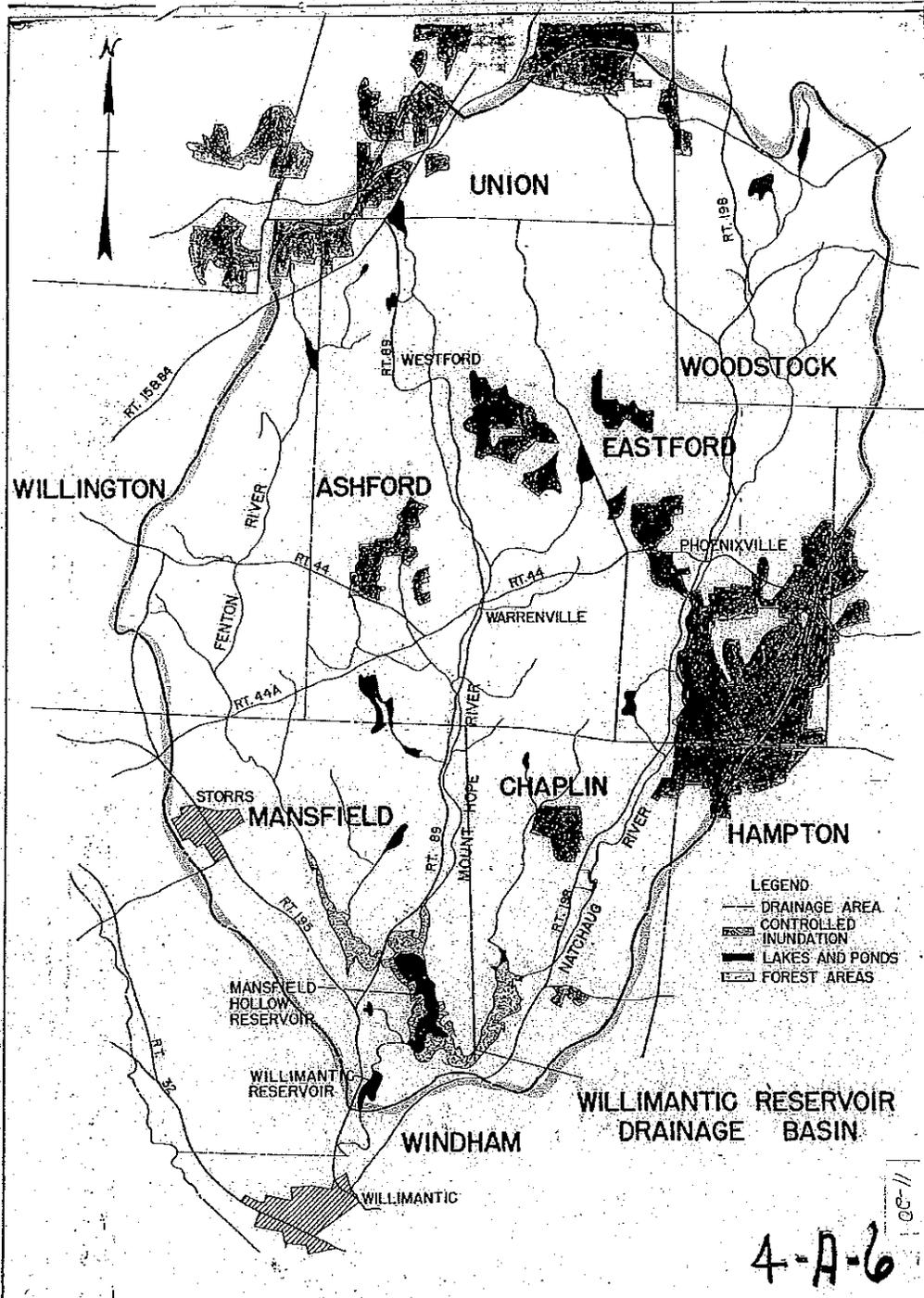
Project site address: _____

Town: _____

Project site nearest intersection: _____

Project site latitude and longitude: _____

E-mail completed form to dph.swpmail@ct.gov



4-A-6

06-11

Applicant's Agreement

The Applicant recognizes that the Ashford Inland Wetlands and Watercourses Commission represents citizen volunteers, dedicated to maintaining the quality of Ashford's environment by assisting property owners to comply with the Inland Wetlands Act (Conn. Gen. Stat 22a-36 through 22a-45) and Ashford Wetland Regulations as revised. That this Commission is acting as the State Regulatory Agency for the Town of Ashford. The Applicant agrees that this application will be considered complete when all required information and documents are submitted.

The Applicant further agrees that failure to provide complete information as requested in this application, and such additional information the Commission may require, or to provide accurate and truthful information will result in denial of this request for permit and revocation of any issued permit wrongfully obtained.

Signature of Applicant(s)

_____ Dated _____

Signature of Owner(s), if different from Applicant(s)

_____ Dated _____

Permission to Access Property

The Applicant and the Property Owner both grant permission to the Ashford Inland Wetlands and Watercourses Commission and their appointed Wetlands Officer to enter upon the subject property, during reasonable hours, for a period of time from the submission date of this application to the completion date of the permitted activity. The purpose of such access to the property is to ascertain the effect and/or impact of the wetlands activity and to inspect the property during the activity to assure compliance with the specifications of the issued permit.

Signature of Applicant(s)

Signature of Owner(s)

AIWWC PERMIT PROCESSING FORM

ASHFORD LAND USE OFFICE: (File # _____)

APPLICATION RECEIVED AND DEEMED COMPLETE
DATE ___/___/____ BY: _____

APPLICATION INCOMPLETE, WAITING: _____

FEE RECEIVED IN THE AMOUNT OF \$ _____

DATE ___/___/____ By: _____

WETLAND COMMISSION STATUS

APPLICATION ACCEPTED AT (___ REGULAR MEETING) (___ SPECIAL MEETING)
ON ___/___/____

ACTION TAKEN: _____

PUBLIC HEARING DATE (S) ___/___/____; ___/___/____
PUBLISHED: _____

FINAL ACTION: DATE ___/___/____

___ PERMIT ISSUED WITH STANDARD CONDITIONS

___ PERMIT ISSUED WITH ADDITIONAL CONDITIONS
(SEE FILE DOCUMENTATION)

___ PERMIT DENIED WITHOUT PREJUDICE

___ PERMIT DENIED FOR CAUSE
(SEE FILE DOCUMENTATION)

ASHFORD INLAND WETLANDS and WATERCOURSES COMMISSION
5 Town Hall Road, Ashford Connecticut 06278

PROCEDURES AND FEE SCHEDULE

You may mail or hand deliver an application, with the required attachments, to the Ashford Land Use Office at the address above. The Commission meets at the Ashford Town Hall on the first Tuesday of each month at 7:00 PM. Your application must be in the hands of the Wetlands Official by noon of the Friday preceding the meeting. The Commission will consider your application at the next scheduled meeting following submission. Your application will be subject to a 15 day period in which the Commission must accept petitions, signed by 25 Ashford residents demanding a Public Hearing. Normally your application will be considered at the meeting following submission and a decision will be made between 14 and 65 days, subject to any extensions requested by you.

If the Commission receives a valid petition for a Public Hearing, or decides that the impact of your proposed activity is significant enough to require a Public Hearing, you will be required to furnish names of and preaddressed envelopes for all abutting property owners. The Commission will notify the property owners, by certified mail, of the Public Hearing date. In such event, you will be billed for postage and legal notice publication.

Any changes in your plan after the Commission has completed its review and made a decision, must be brought to the Commission again before any activity can begin.

The Commission recommends that you obtain a copy of the Ashford Inland Wetlands Regulations, which are available from the Town Clerk, or Ashford Land Use Office, or the Town's municipal Web Site.

Fee Schedule:

Note: State of Connecticut surcharge must be added to each Ashford fee.

1. Uses permitted "As of Right"	No Charge
2. Regulated Uses	
A) Residential Uses on a Single Lot	\$60.00
B) Residential Subdivision	\$170.00
	Plus- \$30.00 per lot
C) Commercial Uses	\$170.00
D) All Other Uses	\$170.00
E) Engineering Review	\$105.00/hr
F) Environmental/Wetlands Consultant	\$100.00/hour
G) Town Legal Counsel	up to \$150.00/hour
H) Wetlands Agent Inspection	35.00/hour min.

Effective October 1, 2009.

To comply with Public Act 92-235 of the CT General Assembly,
a \$60. surcharge is added to each of the above Ashford fees.

DO NOT INCLUDE THIS SHEET WITH YOUR APPLICATION

Submission Acknowledgement and Receipt for Payment of Fees

Acknowledgement of receipt of ¹⁰required ~~eight~~ copies of the Application and
required attachments in good order on ___/___/___

By _____

Further, this office acknowledges the receipt of the Application Fee

In the amount of \$_____, on ___/___/___

From _____ Applicant (s)

By: _____, for Town of Ashford, Land Use Office

(Land Use Office to copy and attach check)