

**TOWN OF OLD SAYBROOK  
Inland Wetlands & Watercourses Commission**

302 Main Street • Old Saybrook, Connecticut 06475-1741  
Telephone (860) 395-3131 • FAX (860) 395-3125

**APPLICATION TO CONDUCT A REGULATED ACTIVITY**

APPLICATION # \_\_\_\_\_

*Date received by Land Use Department:* \_\_\_\_\_

*Received by Commission on:* \_\_\_\_\_

**Check Appropriate Activity & Attach Check for Amount**

<input type="checkbox"/> Residential – single lot \$75.00 <input type="checkbox"/> Residential – subdivision \$250.00 <input type="checkbox"/> Commercial/Industrial \$250.00 <input type="checkbox"/> Significant Activity Fee \$375.00 <input type="checkbox"/> Additional Fee For Cost of Technical Review - Actual Cost	<input type="checkbox"/> Modification of Wetlands Boundary \$75.00 <input type="checkbox"/> Modification of Existing Permit (minor) 25.00 <input type="checkbox"/> Permit Ownership Transfer Fee \$25.00 <input type="checkbox"/> Modification of previous approval (minor) \$25.00 <input type="checkbox"/> Minor Activity IWWC Compliance Certificate \$25.00 <input checked="" type="checkbox"/> + <b>\$30.00 State Fee for ALL Applications</b>
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**TOTAL APPLICATION FEE AMOUNT \$ \_\_\_\_\_ RECEIVED BY \_\_\_\_\_**

1. **Name of Applicant** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Home Telephone** \_\_\_\_\_

**Business Address** \_\_\_\_\_ **Bus. Telephone** \_\_\_\_\_

2. **Name of Property Owner** \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Home Telephone** \_\_\_\_\_

**Business Address** \_\_\_\_\_ **Bus. Telephone** \_\_\_\_\_

3. **If applicant other than owner, please state interest in the land** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. **Location of Property by Street Address** \_\_\_\_\_

**Assessor's Map No.** \_\_\_\_\_ **Lot No.** \_\_\_\_\_

5. **State the names of all property owners adjacent to the subject property: (use additional sheet if necessary)**

Name of Adjacent Property Owner	Street Address

Name of Adjacent Property Owner	Street Address

6. **State the purpose, proposed use and a summary description of the proposed activity. (Please be specific, use additional sheets if necessary)**

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7. **Activity Location (Map with sufficient detail must be submitted as a part of the application)**

Number of acres of wetlands (or portion thereof) on the property \_\_\_\_\_

Total area of inland wetlands to be altered \_\_\_\_\_

Are vernal pools or tidal wetlands located on the property? If so, where and how many acres (or portion thereof) on the property?

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Are inland wetlands and/or watercourses located on adjacent properties? If so, state the name of the property owner and if it is a wetland and/or watercourse.

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Has a licensed soil scientist flagged the wetlands and/or watercourses on this property? If so, who and when?

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Nearest Thoroughfare \_\_\_\_\_ Distance from Thoroughfare (in feet) \_\_\_\_\_

Zoning District \_\_\_\_\_

8. **Check applicable activities occurring within 0 -100 feet of wetlands and/or watercourses.**

Removal

Vegetation Removal

Filling

Vegetation Restoration

Surface Water Diversion

Paving

Discharge – Specify Type \_\_\_\_\_

Other – Specify Type \_\_\_\_\_

9. Explain in detail the extent of any activity checked above, type of material and equipment to be used to complete project. (Use additional sheets if necessary)

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10. Estimated cost and time for completion: \_\_\_\_\_

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11. Explain what alternatives have been considered in connection with this application to avoid altering inland wetlands and/or watercourses?

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12. Identify any other local, State or Federal permits previously issued or pending that will be required for work on this property?

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13. The undersigned applicant warrants the truth of all statements contained herein, and in all supporting documents attached hereto or which may be presented to the Commission in the future, pursuant to this application.

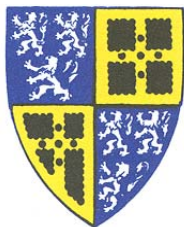
I further understand that the Commission may request further information in connection with this application and that if the proposed activity involves a significant activity, an additional filing fee will be required.

Dated: \_\_\_\_\_  
Signature of Applicant or Agent

14. The undersigned, as owner of the property, hereby consents to necessary and proper inspections of the above-mentioned property by agents of the Town of Old Saybrook, the Connecticut Department of Environmental Protection and the U.S. Department of Agriculture, Soil Conservation Service, at reasonable times, both before and after a final decision has been issued by the Old Saybrook Inland Wetlands and Watercourses Commission.

I understand the Old Saybrook Inland Wetlands & Watercourses Regulations, have had an opportunity to review these regulations and understand that these regulations regulate activities conducted on my property. In the event this application is approved and the permit is transferred to another property owner, I understand that it is my responsibility to contact the Inland Wetlands Enforcement Officer and advise the Transferee in writing that an Application for Permit Transfer must be received by the Inland Wetlands & Watercourses Commission in order for the permit issued to remain valid.

Dated: \_\_\_\_\_  
Signature of Property Owner



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**APPLICATION CHECKLIST**  
**TO BE COMPLETED BY COMMISSION AND/OR IT'S STAFF**

1. Applicant: \_\_\_\_\_
2. Date of Application: \_\_\_\_\_ Application #: \_\_\_\_\_
3. Date of Receipt of Completed & Signed Application: \_\_\_\_\_
4. Date of Public Hearing (if required): \_\_\_\_\_
5. Decision of Commission & Reason for Decision: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Stipulations of Permit (if approved) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Date of Notification of Application of Decision \_\_\_\_\_
8. Date of Publication of Decision (if required) \_\_\_\_\_
9. Date CT DEP Statewide Reporting Form Completed \_\_\_\_\_
10. Date of Modifications to Permit and/or Extension of Permit (if Applicable) \_\_\_\_\_  
\_\_\_\_\_
11. Additional Comments \_\_\_\_\_  
\_\_\_\_\_

**This form was completed by** \_\_\_\_\_

**Title of Individual Completing Form** \_\_\_\_\_