Meeting Oct 18,202

## TOWN OF HADDAM INLAND WETLANDS COMMISSION PERMIT APPLICATION

	Permit # $\frac{\omega_2 - 00}{\omega}$
	Assessor's Map: 60 Lot: 26-7
	Applicant's Name: Bradley Son Kouski
	Home Phone:  Cell Phone:  Work Phone: Middle fown CT 06457  EMAIL: Northeast feed stoupp / 20 gmap
	Address: 968 Killingworth RS
	Property Owner(s): Tracking Post Dev. Chris Swiss
I MI	Property Owners(s) Address: 30 Pond Meadon Kill-zghof
700	Property Street Location OF WORK: 968 Killing worth Da
	Proposed Activity: 00 t doo 1156 S
25	
11	
	DIMENSIONS OF THE PROJECT
	Type of upland review area (minor, major, watercourse)
	Total acreage of property where activity is proposedAcres
	Total regulated area on the property (wetlands, watercourses)Acres
	Size of regulated area on which regulated activity is to take placeSq. Ft.
	Acreage or square feet of wetlands and watercourses createdAcres
	Acreage or square feet of wetlands and watercourses alteredAcres
	Linear feet of stream alterationFt
	Is property located within a Special Flood Hazard Area?
	Is the property located within a FEMA Flood Zone?
	Is property located within the Channel Encroachment Line of the Connecticut River?
	(over – to reverse side – both sides must be completed)

NOTE: IF YOU HAVE ANY QUESTIONS ABOUT COMPLETING THIS APPLICATION, PLEASE
CALL THE HADDAM INLAND WETLANDS AGENT at (860) 345-8532 EXT 224

Revised 02/10/16



GIS CODE #:				_	 	
For DEEP Use Only	13.	3' 1 .	14	33.50		

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 - <u>print clearly</u> - and mail this form in accordance with the instructions on pages 2 and 3 to: Wetlands Management Section, Inland Water Resources Division, CT DEEP, 79 Elm Street – 3<sup>rd</sup> Floor, Hartford, CT 06106

	PART I: To Be Completed By the Municipal Inland Wetlands Agency Only							
1.	DATE ACTION WAS TAKEN (enter one year and month): Year Month							
2.	ACTION TAKEN (enter one code letter):							
3.	WAS A PUBLIC HEARING HELD (check one)? Yes No							
4.	NAME OF AGENCY OFFICIAL VERIFYING AND COMPLETING THIS FORM:							
	(type name) (signature)							
	DADTIL To De Completed De the Manisire United Weller de Assessed de Assessed							
	PART II: To Be Completed By the Municipal Inland Wetlands Agency or the Applicant							
5.	TOWN IN WHICH THE ACTION IS OCCURRING (type name): Haddam / Higganum							
	Does this project cross municipal boundaries (check one)? Yes No							
	If Yes, list the other town(s) in which the action is occurring (type name(s)):,							
6.	LOCATION (see directions for website information): USGS Quad Map Name: or Quad Number:							
	Subregional Drainage Basin Number:							
7.	NAME OF APPLICANT, VIOLATOR OR PETITIONER (type name): Bradley Dom Kawski							
8.	NAME & ADDRESS/LOCATION OF PROJECT SITE (type information):  Bradley Dom Kawski  NAME & ADDRESS/LOCATION OF PROJECT SITE (type information):  968 Killingworth Rd.							
	Briefly describe the action/project/activity (check and type information): Temporary Permanent							
	Description:							
9.	ACTIVITY PURPOSE CODE (enter one code letter):							
10.	ACTIVITY TYPE CODE(S) (enter up to four code numbers):,,,							
11.	WETLAND / WATERCOURSE AREA ALTERED (type in acres or linear feet as indicated):							
	Wetlands: acres							
12	UPLAND AREA ALTERED (type in acres as indicated): acres							
13.	AREA OF WETLANDS / WATERCOURSES RESTORED, ENHANCED OR CREATED (type in acres as indicated): acres							
DATE RECEIVED: PART III: To Be Completed By the DEEP DATE RETURNED TO DEEP:								
FC	DRM COMPLETED: YES NO FORM CORRECTED / COMPLETED: YES NO							