

TOWN OF ESSEX  
LAND USE APPLICATION  
PART ONE

# 1WVC 21-3

PLEASE CHECK THE APPROPRIATE LINE(S) AND ATTACH THE APPROPRIATE APPLICATION(S):

SPECIAL EXCEPTION	___	VARIANCE/ APPEAL	___
SITE PLAN REVIEW	___	APPROVAL OF LOCATION	___
INLAND WETLANDS PERMIT	<input checked="" type="checkbox"/>	REGULATION TEXT AMENDMENT	___
INLAND WETLANDS PERMIT - AGENT APPROVAL	___	ZONE CHANGE	___
	___	COASTAL SITE PLAN REVIEW	___
WETLAND PERMIT TRANSFER	___	MODIFICATION OF PRIOR APPROVAL	___
SUBDIVISION / RESUBDIVISION	___	SPECIAL FLOOD HAZARD AREA PERMIT	___

PROJECT DESCRIPTION:

INSTALL ATLAS PORTABLE BRIDGE

STREET ADDRESS OF PROPERTY

76 Main St Ivoryton CT

ASSESSOR'S MAP

57

LOT

28

LOT SIZE

0.75 acres

DISTRICT

UR

APPLICANT

Frederick Jones

PHONE

800-581-8444

APPLICANT'S AGENT (if any)

PHONE

ENGINEER.SURVEYOR/ARCHITECT

PHONE

Note:

1) TO BE ACCEPTED BY THE LAND USE OFFICE. THIS APPLICATION MUST BE COMPLETED, SIGNED, AND SUBMITTED WITH THE REQUIRED FEE(S) AND MAP(S) PREPARED IN ACCORDANCE WITH THE APPLICABLE REGULATIONS.

2) THE SUBMITTAL OF THIS APPLICATION CONSTITUTES THE PROPERTY OWNER'S PERMISSION FOR THE COMMISSION OR ITS STAFF TO ENTER THE PROPERTY FOR THE PURPOSE OF INSPECTION.

3) I HERBY AGREE TO PAY ALL ADDITIONAL FEES AND/OR ADDRESS SUCH COSTS DEEMED NECESSARY BY THE LAND USE OFFICE AS DESCRIBED IN PART THREE OF THIS APPLICATION.

**Town of Essex**  
**Inland Wetlands and Watercourses Commission**

**Revised 5/2017** Fee: \$60 to Essex + \$60 to State = \$120

✓ #112

Application # 21-3 Date received by Office 3/3/21 Fee 120.-

**Owner of Record** \_\_\_\_\_

Home Address 76 Main Street Iwington Ct 06442

Mailing Address: Same

Phone: Home/Cell 860-581-8444 Work: cell 860-338-1581

**Applicant's Name:** FREDERICK J Done

Home Address 76 Main ST Iwington Ct 06442

Mailing Address: Same

Phone: Home/Cell \_\_\_\_\_ Work: \_\_\_\_\_

Applicant's interest in the land if the applicant is not the property owner \_\_\_\_\_

Location of Property by Street & Village Address: 76 Main ST Iwington Ct 06442

**State the names of all property owners adjacent to the subject property:**

Name of Adjacent Property Owner	Street Address (include Mailing Address if Different)
<u>Linda Tosti</u>	<u>82 Main St Iwington</u>

**For large properties, please attach another sheet if necessary.**

Check applicable activities occurring in or within 100 feet of wetlands and/or watercourses:

- |   |                              |
|---|------------------------------|
| Construction of a structure(s) <u>X</u> | Discharge _____              |
| Other site development work _____       | Pond creation/dredging _____ |
| Deposition or removal of material _____ | Tree removal _____           |
| Stream altering/channelization _____    | Dam maintenance _____        |
| Subdivision/Resubdivision _____         | Other _____                  |

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

Proposing Proposing a carport 14' x 20' on the existing concrete pad

Estimated time for completion: \_\_\_\_\_

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

Reduced size of Garage

**ACTIVITY LOCATION (Map with sufficient detail must be submitted as a part of the application)**

Approximate number of acres of wetlands (or portion thereof) on the property: < 0.1 acres

Approximate area of inland wetlands to be altered: 0

If known, are vernal pools or tidal wetlands located on the property? No

If yes, where and how many acres (or portion thereof) on the property? \_\_\_\_\_

Is property located within a Special Flood Hazard Area? No

Is any portion of the property within the channel encroachment line? No

Has the property been flagged by a licensed soil scientist No

If yes, by who, and when? \_\_\_\_\_

Will there be water discharge into wetlands? No

Discharge - Specify Type \_\_\_\_\_

ADDITIONAL INFORMATION MAY BE REQUIRED DEPENDING UPON THE COMPLEXITY OF THE PROJECT.

**CERTIFICATION:**

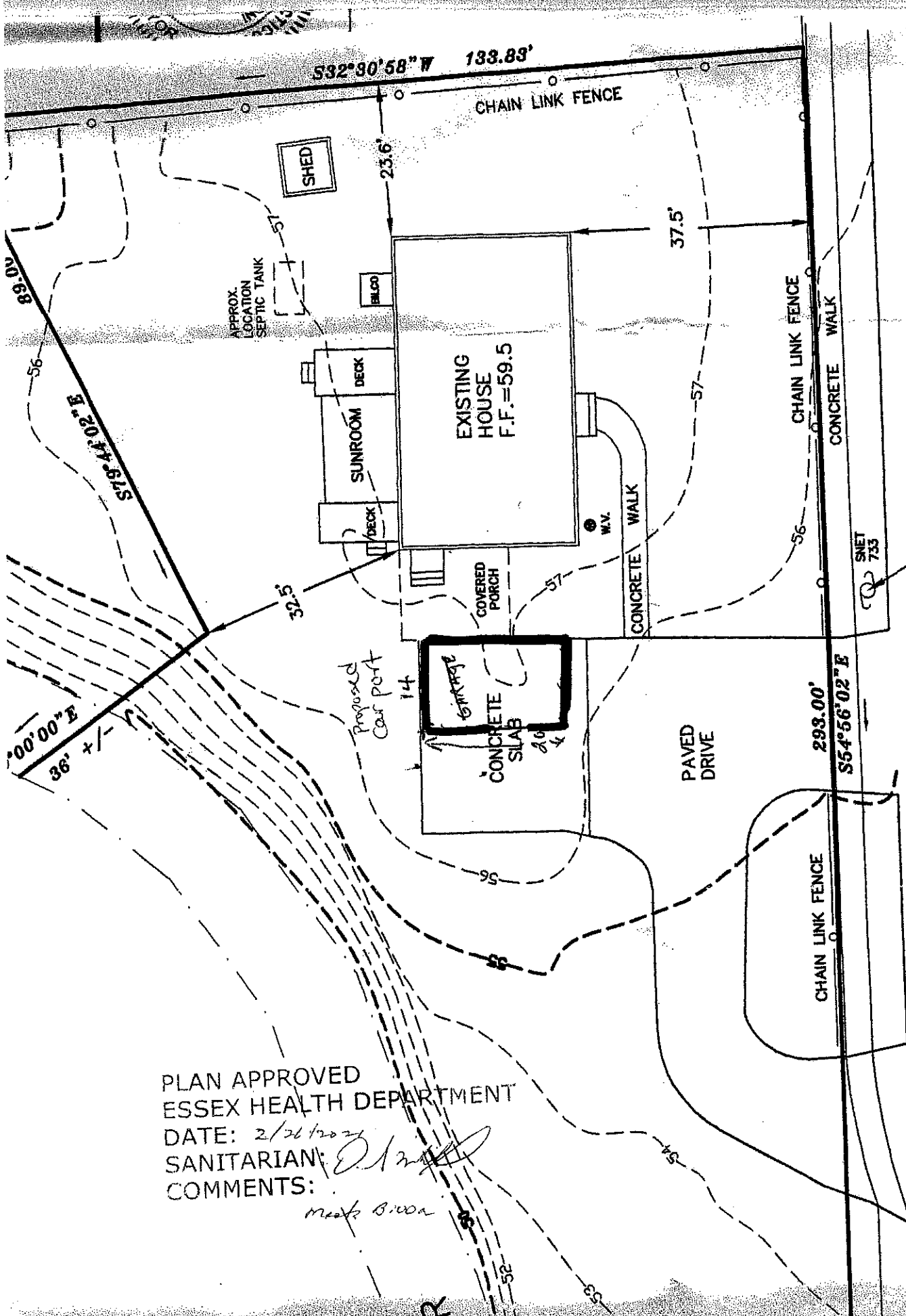
The applicant understands that this application is to be considered complete only when all information and documents required by the Commission have been submitted. The undersigned warrants the truth of all statements contained herein and in all supporting documents according to the best of his/her knowledge and belief. Permission is granted to the Town of Essex Inland Wetlands and Watercourses Commission and its agent(s) to walk the land, at reasonable times, and perform those tests necessary to property review the application, both before and after a final decision has been issued.

Applicant's Signature [Signature] Date 3-2-21

Owner's Signature [Signature] Date 3-2-21

Commission Action	Approved _____	Denied _____	Date _____
Agent Action	<u>3/22/21</u> Approved <u>[Signature]</u>	Denied _____	Date _____





PLAN APPROVED  
 ESSEX HEALTH DEPARTMENT  
 DATE: 2/26/2021  
 SANITARIAN: *[Signature]*  
 COMMENTS: *meets B.W.A.*

*Fred Jones 860-581-8444 call 978-501-5276*

**MAIN STREET**

*ADD 20x14 GARAGE*