

Town of Essex
Inland Wetlands and Watercourses Commission

Revised 3/9/2022

Application # 22-07 Date received by Office 5/3/22 Fee 60.00

Owner of Record Essex Land Trust Inc.

Home Address _____

Mailing Address: P.O. Box 373, Essex, CT 06426

Phone: Home/Cell _____ Work: _____

Applicant's Name: Town of Essex

Home Address 29 West Main Street, Essex, CT 06426

Mailing Address: 29 West Avenue, Essex, CT 06426

Phone: Home/Cell _____ Work: 860-767-4343

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

Location of Property by Street & Village Address: _____

Map 57 Lot 069 Lot Size 2.63 Ac District VR

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

Construction of a structure(s)	_____	Discharge	_____
Other site development work	<u>X</u>	Pond creation/dredging	_____
Deposition or removal of material	<u>X</u>	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.)

Proposed to create a gravel parking area for 4 cars at the trail head of the Millrace.
Area will be excavated to remove the topsoil and one ft of the subsoil then filled with
gravel to make a parking area.

Estimated length of time for project : 2 weeks

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.

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

No inland wetlands or watercourses will be alter.

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: 0.5 +/- Ac

Approximate area of inland wetlands to be altered: 0

Approximate length of watercourse(s) on the property: 800 ft +/- (Falls River)

Approximate length of watercourse(s) to be altered: 0

Approximate number of acres of upland review area on the property: 1.63 Ac

Approximate area of upland review area to be altered: 0.1 Ac

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? Yes

If yes, where and how many acres (or portion thereof) on the property? 2 Ac

Has the property been flagged by a licensed soil scientist No

If yes, by who, and when? _____

Will there be water discharge into wetlands? Yes

Discharge -- Specify Type Stormwater runoff (sheetflow)

Please complete the attached State Reporting Form

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

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

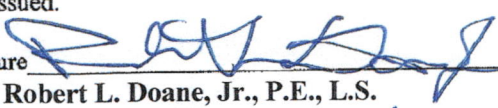
Name of Adjacent Property Owner	Street Address (include Mailing Address if Different)
See Attached	

For large properties, please attach another sheet if necessary.

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 properly review the application, both before and after a final decision has been issued.

Applicant's Signature



Date

5/3/22

Agent for Applicant: Robert L. Doane, Jr., P.E., L.S.

Owner's
Signature



Date

5/3/22

Agent for Owner: Robert L. Doane, Jr., P.E., L.S.

Commission Action

Approved

Denied

Date

Agent Action

Approved

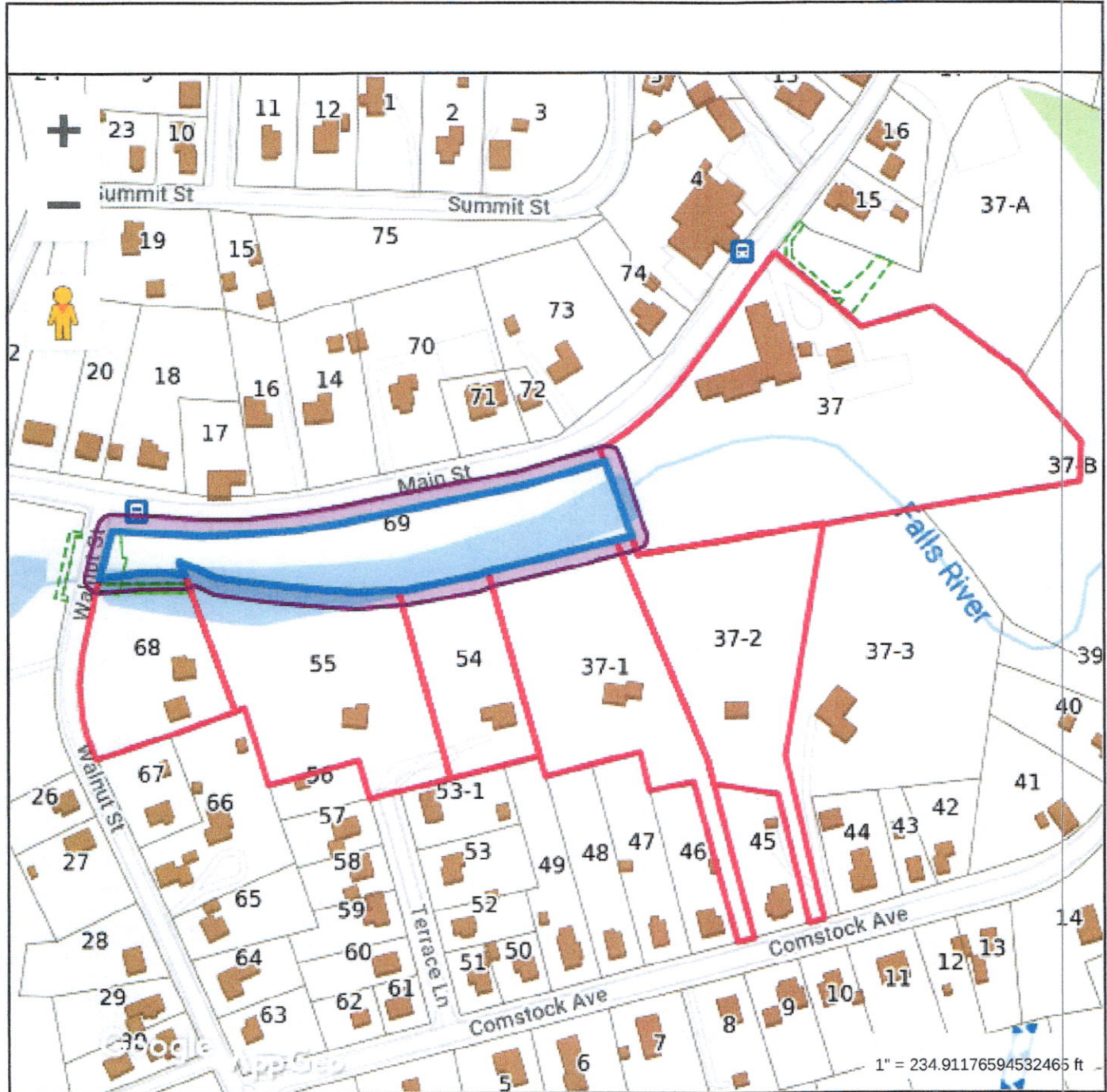
Denied

Date

**ADJOINERS
MILL RACE PARKING**

ID	Site Address	Owner Name	Owner Address	Owner City	St	Zip
57-055	11 TERRACE LA	CLARK JACQUELINE M	1429 RED VILLAGE RD	LYNDONVILLE	VT	05851
57-037-01	53 COMSTOCK AVE	TUBBS WILLIAM J & GAIL L	53 COMSTOCK AVE	IVORYTON	CT	06442
57-068	7 WALNUT ST	MAYNARD LAURA M & DAVID W IV	P.O. BOX 166	IVORYTON	CT	06442
57-037-02	49 COMSTOCK AVE	MCPHERSON PATRICK F JR & THERESA J	49 COMSTOCK AVE	IVORYTON	CT	06442
57-037	126 MAIN ST IVTN	MUR PROPERTIES LLC	11 BECKWITH LN	OLD LYME	CT	06371
57-054	9 TERRACE LA	BAUER MONICA AND NICHOLS KENNEDY C	9 TERRACE LA	IVORYTON	CT	06442

559. 6202



Property information

Property ID 57 69
 Location MAIN ST MTN
 Owner ESSEX LAND TRUST INC

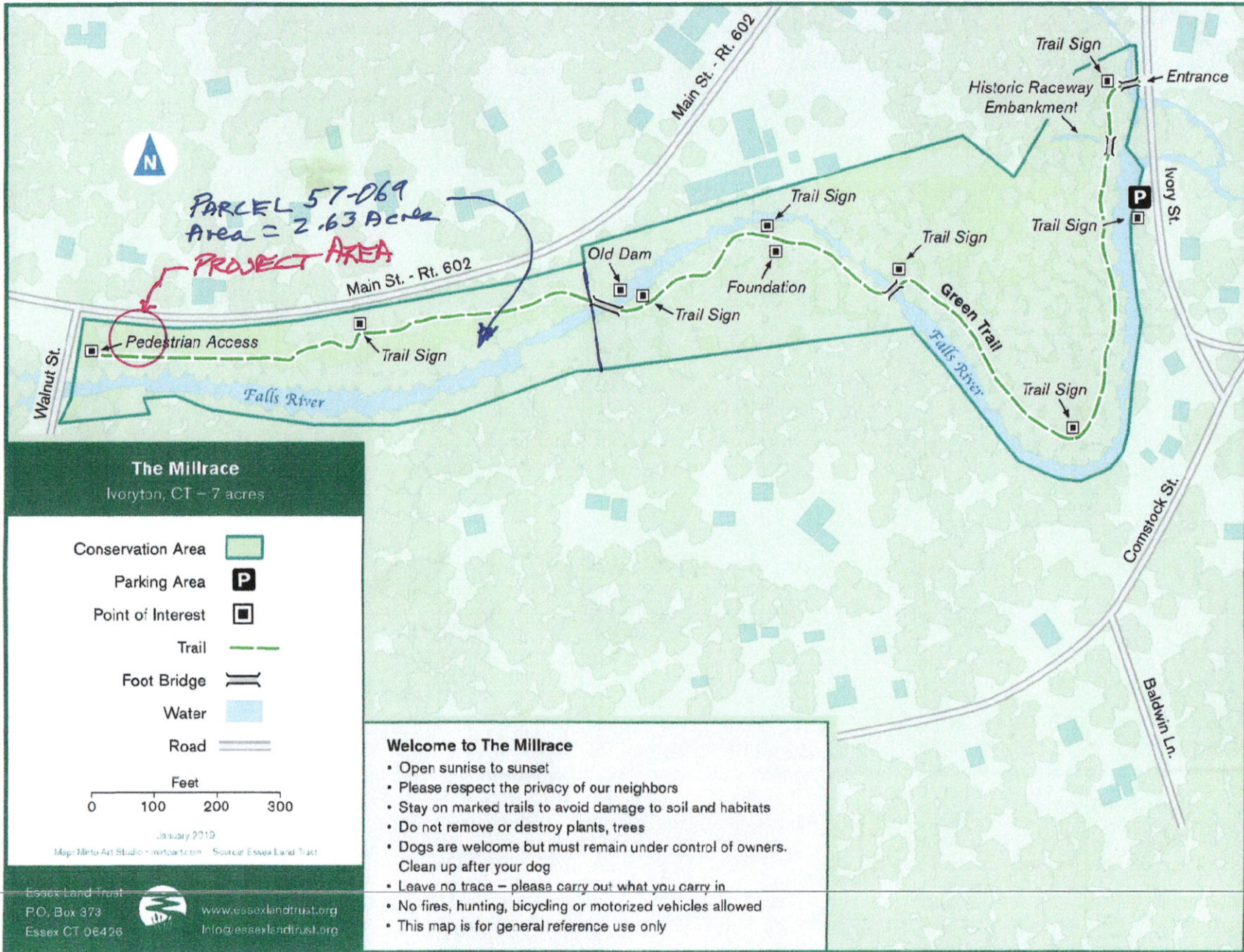


**MAP FOR REFERENCE ONLY
 NOT A LEGAL DOCUMENT**

Town of Essex, CT makes no claims and no warranties, expressed or implied, concerning the validity or accuracy of the GIS data presented on this map.

Geometry updated 4/13/2021
 Data updated daily

Print map scale is approximate.
 Critical layout or measurement activities should not be done using this resource.





Statewide Inland Wetlands & Watercourses Activity Reporting Form

*Please complete this form in accordance with the instructions on pages 2 and 3 and mail 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

- DATE ACTION WAS TAKEN: year: _____ month: _____
- ACTION TAKEN (see instructions - one code only): _____
- WAS A PUBLIC HEARING HELD (check one)? yes no
- 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

- TOWN IN WHICH THE ACTIVITY IS OCCURRING (print name): Ivoryton
does this project cross municipal boundaries (check one)? yes no
if yes, list the other town(s) in which the activity is occurring (print name(s)): _____
- LOCATION (see instructions for information): USGS quad name: Essex or number: 99
subregional drainage basin number: _____
- NAME OF APPLICANT, VIOLATOR OR PETITIONER (print name): Town of Essex
- NAME & ADDRESS OF ACTIVITY / PROJECT SITE (print information): Site Plan prepared for Essex Land Trust
briefly describe the action/project/activity (check and print information): temporary permanent description: _____
Construct parking area for trail head on open space
- ACTIVITY PURPOSE CODE (see instructions - one code only): E
- ACTIVITY TYPE CODE(S) (see instructions for codes): 1, 2, 9, 12
- WETLAND / WATERCOURSE AREA ALTERED (see instructions for explanation, must provide acres or linear feet):
wetlands: 0 acres open water body: 0 acres stream: 0 linear feet
- UPLAND AREA ALTERED (must provide acres): 0.1 acres
- AREA OF WETLANDS / WATERCOURSES RESTORED, ENHANCED OR CREATED (must provide acres): 0 acres

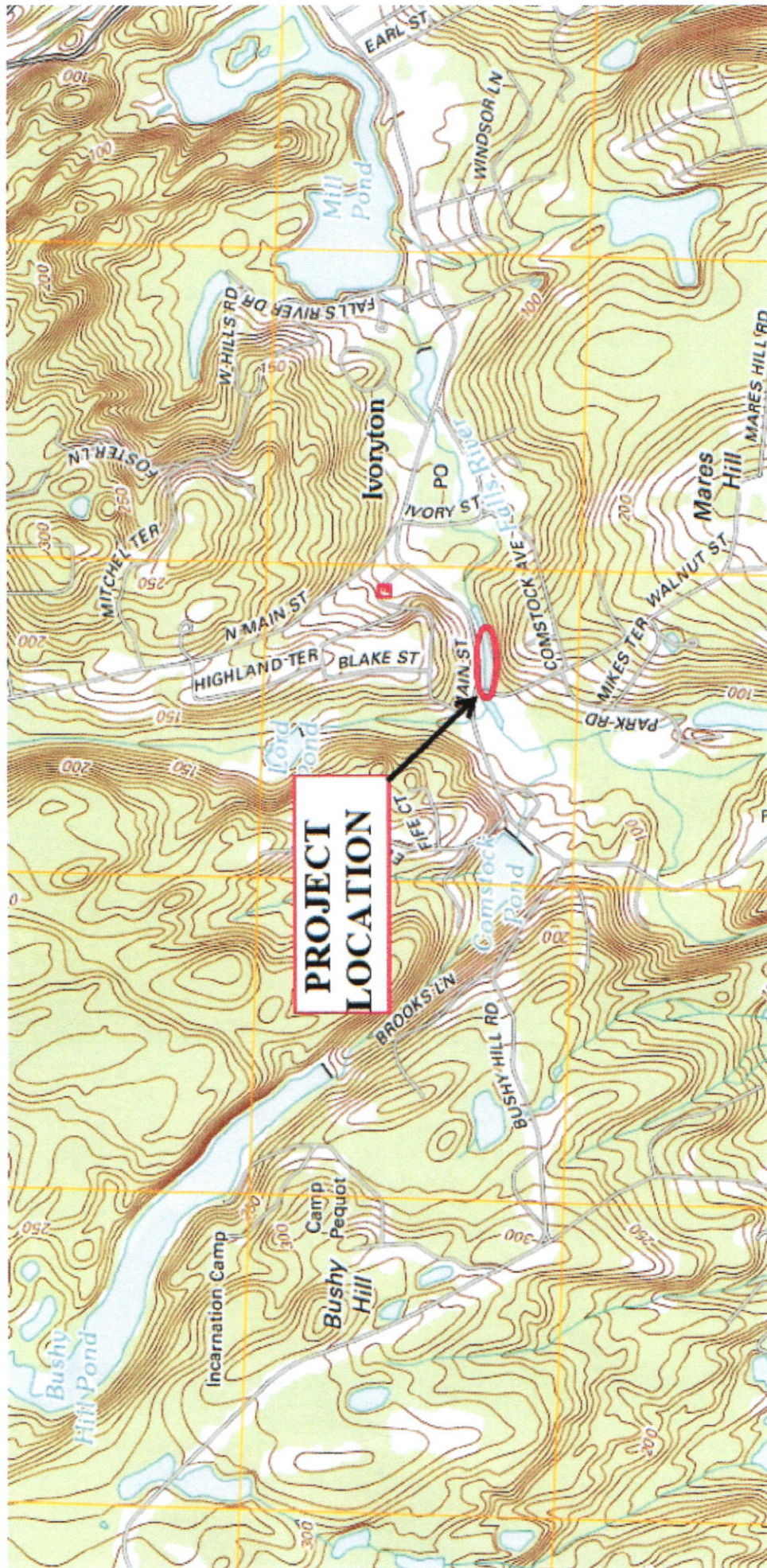
DATE RECEIVED:

PART III: To Be Completed By The DEEP

DATE RETURNED TO DEEP:

FORM COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO



**PROJECT
LOCATION**