

APPLICATION #____

Revised 04/2019

INLAND WETLANDS PERMIT APPLICATON

Easton Conservation Commission Inland Wetlands Agency 225 Center Rd. Easton, CT 06612

Phone (203) 268- 6291 Fax (203) 268- 4928

This application is for permission to conduct regulated activities in accordance with the Inland Wetlands and Watercourses Regulations of the Town of Easton.

GEOGRAPHICAL LOCATION OF D	DODEDTY OF Winds In I
GEOGRAPHICAL LOCATION OF P	
ASSESSOR'S MAP #_ 3772B	BLOCK <u>3773B</u> LOT# <u>33</u>
NAME OF APPLICANT: Easton Ra	acquet Club
HOME ADDRESS:	
	don Lane, Inc.
HOME PHONE #	BUSINESS # CELL # 203-767-7936
PREFERRED CONTACT:Home	Business X Cell
NAME OF PROPERTY OWNER: _E	aston Racquet Club, Inc.
HOME ADDRESS:	
BUSINESS ADDRESS: 36 Wimbled	don Lane
HOME PHONE # B	BUSINESS # CELL #_ 203-767-7936
TOWN LAND RECORDS, OWNERS	SHIP OF PROPERTY: VOLUME: 60 PAGE: 435
1. EXISTING CONDITIONS (Describ	be existing property structures.)
Two story clubhouse with deck, size	ix tennis courts, two paddle board courts, swimming
pool and pool house.	

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Construct pickleball courts with light	ghting,			
Construct two additional paddle b	oard cou	rts with lighting.		
3. PURPOSE OF PROPOSED ACTIVI habitat, industrial construction, etc.)	TY (e.g. a	addition to existing dv	velling, im	proving wildlife
Improve playing conditions with ex	panded p	olaying opportunities	3	
with additional courts.				
4. WETLAND/WATERCOURSE ARE	A ALTEF	RED		
Wetlands: 0 acres		Open water body:		0 acres
Stream: 0 linear fee	et	Upland area altered	i:	0 acres
Area of wetlands &/or watercourses res	tored, enh	anced or created:		0 acres
5. WHAT ALTERNATIVES TO THE CONSIDERED?	PROPOSE	ED REGULATED AC	TIVITY I	HAVE YOU
No other alternatives are possible	with the e	extent of previous co	onstructio	n. Other
locations would have greater impa	cts to we	tlands.		
6. If this permit application is approved, activity (from date of approval)?	how muc	h time do you feel is 1	needed to	complete the proposed
Six months				
In conformance with Section 10-2 of the	Inland W	etland Regulations, the	ne Agency	is obligated to consid
 and will require your review of the factor The alternatives to the proposed 	rs related	to your proposal:		
 The environmental impact of the 	proposed			
 The relationship between your sl enhancement of long-term produ 	ort-term to	ise of the environmen the Town of Faston	t and the n	naintenance and

- · Irreversible and irretrievable commitments of resources
- · Character and degree of injury to safety, health or the use of property
- · Suitability of the activity to the area
- · Measures that would mitigate the impact on the area

Additional approvals for your proposal may be required from the Planning and Zoning Commission, the State Department of Environmental Protection (DEEP), and the United States Army Corp of Engineers. If so, you are encouraged to seek their guidance at your earliest opportunity.

Additional Requirements:

- 1. Attach a signed, witnessed consent to the proposed activity by the owner, (If the applicant is not the property owner).
- 2. Attach <u>six (6) plans</u> showing location of proposed activity on property, showing, location of existing and proposed structures, graphic scale, contour intervals, an erosion and sediment control plan, North arrow, title, date and signature on this and all subsequent plans. Please delineate on these site plans the 100-foot (200-foot from large pond or watercourse) setback.
- 3. <u>If a Public Hearing is required, then you are to provide names and mailing addresses</u> including zip codes) of adjacent property owners of record, including those on opposite sides of public rights-of-way. Correlate with Assessor's Map and parcel numbers.
- 4. Attach three (3) completed copies of this application.
- 5. IF YOUR PROPERTY IS IN THE WATERSHED AREA, you MUST notify (A) <u>Aquarion</u> <u>Water Company AND (B) the Commissioner of Public Health</u>. Per Connecticut General Statutes Section 22a-42f, an applicant for a permit to conduct a Regulated Activity must notify the local water company if the site of the project is within the watershed of the water company. In conjunction with your application to the Inland Wetlands Agency, we are obligated to notify you (under Substitute Senate Bill No. 313, Public Act No. 06-53, Section 22a-42f) of your responsibility to provide written notice of the application to both the Aquarion Water Company AND the Commissioner of Public Health (link to fillable form below).
 - (A) The required notice to <u>Aquarion Water Company</u> (i.e. a copy of the submitted map and the completed Inland Wetland Permit application) should be sent within 7 days of submitting your application by certified mail, return receipt requested to:

Aquarion Water Company 714 Black Rock Road Easton, CT 06612-1146

(B) The required notice to the <u>Commissioner of Public Health</u> should be emailed to dph.swmail@ct.gov within 7 days of submitting your application on the fillable form (Watershed or Aquifer Area Project Notification Form) located online at: https://portal.ct.gov//media/DepartmentsandAgencies/DPH/dph/drinking_water/pdf/WatershedorAquiferAreaProjectNotificationFormpdf.pdf?la=en

C.G.S 22a-42f https://www.cga.ct.gov/current/pub/chap_440.htm#sec_22a-42f
The maps mentioned in the statute have been filed as #1165 and #1166 and are available in both the

Town Clerk office and the Conservation office.

- 6. Attach one copy of the <u>Statewide Inland Wetlands & Watercourses Activity Reporting Form-Part II (BLUE)</u>. https://www.ct.gov/deep/lib/deep/water_inland/wetlands/siwwarf.pdf Applicant must complete the section that will be considered part of this application.
- 7. Attend a Conservation Commission meeting when this application is on the Agenda. Please see Meeting Schedule link on left of page https://www.eastonct.gov/conservation-commissioninland-wetlands-agency.

The undersigned applicant and/or owner understand(s) that this application is to be considered complete only when all information and documents required by the Agency have been submitted.

The undersigned applicant and/or owner hereby consents to necessary and proper inspection of the above mentioned property by agents of the Agency, at reasonable times, both before and after any permit in question has been granted by the Agency.

I declare under penalty of perjury that the foregoing is true and correct.

Keith Rudolph	
Type or print name of applicant	
Signature of applicant	Date
Keith Rudolph	
Type or print name of owner	
V 1 2 1 2	7 11 31 1
	2-18 2021
Signature of owner	Z-18 Z02 (Date
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FOR O Application # Date received in office:	Date OFFICE USE ONLY Amount Paid: \$
FOR O Application # Date received in office:	Date OFFICE USE ONLY
Application # Date received in office: Received by Commission:	Date DEFICE USE ONLY Amount Paid: \$+ 65 days = Deadline Date

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