



MADISON INLAND WETLANDS AGENCY

TOWN OF MADISON
Land Use Office, 8 Campus Drive, Madison, CT 06443
phone: 203 245-5632 fax: 203 245-5613

Check all that apply
(multiple fees may apply if more than one item is checked):

- REGULATED ACTIVITY PERMIT**
- REGULATED ACTIVITY PERMIT MODIFICATION**
- PERMITTED USE AS OF RIGHT: Section 4.1** _____
- NON-REGULATED USE: Section 4.2** _____
- SITE PLAN / SPECIAL EXCEPTION PERMIT REFERRAL**

(FOR OFFICE USE ONLY)	
Appl. No.	_____
Date Filed	_____
Fee Paid	_____
DEP Fee	_____
Unique ID	_____
Date of Receipt	_____

INSTRUCTIONS: Each application shall consist of a signed copy of the application form, supporting documentation, three copies (3) of the completed application and each map, one (1) set of plans reduced to 11"x17", and shall be accompanied by the appropriate application fee. Checks should be made payable to the Town of Madison. Please refer to Inland Wetlands Regulations Section 7 for all application requirements and Section 8 for application procedures. Permitted uses as of right and non-regulated uses are defined in Section 4.

1. LOCATION OF PROPERTY INVOLVED:
 - a. Street Address: _____
Map: _____ Lot: _____
2. TITLE OF PROJECT: _____
3. ORIGINAL APPLICATION NUMBER (for modification applications): _____
4. TOTAL AREA of WETLANDS AND WATERCOURSES UPON WHICH ACTIVITY IS PROPOSED (rounded to the nearest tenth of an acre): _____ acres
 - Residential Use Commercial Use
5. APPLICANT:
 - a. Name: _____
 - b. Mailing address: _____
 - c. Phone: _____ Fax: _____
 - d. If corporation, list names and addresses of officers:

 - e. Interest in property: _____
6. RECORD OWNER:
 - a. Name: _____
 - b. Mailing Address: _____
 - c. Phone: _____ Fax: _____

7. DESIGNATED CONTACT:

- a. Name: _____
- b. Mailing Address: _____
- c. Phone: _____ Fax: _____ email: _____

8. PROFESSIONAL ENGINEER:

- a. Name: _____
- b. Mailing Address: _____
- c. Phone: _____ Fax: _____

9. LICENSED LAND SURVEYOR:

- a. Name: _____
- b. Mailing Address: _____
- c. Phone: _____ Fax: _____

10. SOIL SCIENTIST:

- a. Name: _____
- b. Mailing Address: _____
- c. Phone: _____ Fax: _____

11. LANDSCAPE ARCHITECT / LANDSCAPER:

- a. Name: _____
- b. Mailing Address: _____
- c. Phone: _____ Fax: _____

12. ATTORNEY:

- a. Name: _____
- b. Mailing Address: _____
- c. Phone: _____ Fax: _____

13. NAMES AND ADDRESSES (property location and mailing address) OF ADJACENT PROPERTY OWNERS (submit proof of notification if Public Hearing is scheduled.)

If above space is not sufficient, please attach separate list of adjacent owners.

14. PURPOSE AND DESCRIPTION OF PROPOSED ACTIVITY:

If above space is not sufficient, please attach additional sheet(s).

NATURE OF PROPOSED MODIFICATION:

15. ALTERNATIVES. List alternatives considered by the applicant and state why the proposal to engage in a regulated activity as set forth in this application was chosen:

If above space is not sufficient, please attach additional sheet(s).

16. State amount of material to be deposited or removed in any wetland or watercourse area and/or in any wetland or watercourse review area: _____

a) Amount per area: _____

b) Nature of materials (e.g. sand, gravel, loam, building materials) _____

c) State precise chemical composition of any toxic materials; whether they are to be enclosed in containers of any type or deposited openly without containment. _____

d) Give analysis of chemical or physical characteristics of any fill material: _____

17. Explain how the affected property is to be protected from the erosion or leaching of deposited materials: _____

18. Estimated starting date of activity: _____ Estimated completion date: _____

19. Estimated cost of proposed activity: _____ (Attach itemized cost breakdown.)

20. ADJOINING MUNICIPALITIES. Sites within 500 feet of, or affecting, an adjacent municipality require notification to that municipality and may also require notification to the regional planning agency.

- Site is within 500 feet of an adjoining municipality.
- There may be significant traffic, water or sewer system, or water runoff impact on an adjoining municipality from this project.
- Site is not within 500 feet and will not impact any adjacent municipality.

21. WATER COMPANY NOTIFICATION. The applicant must provide written notice to the affected water company and to the CT Department of Public Health when any project is within an Aquifer Protection Area or watershed of that water company.

- Project is not within an aquifer protection area or watershed of a water company.
- Project is within an Aquifer Protection Area or watershed of a water company and that company and CT DPH have been notified.

22. GENERAL PERMIT FOR THE DISCHARGE OF STORMWATER. Any activity that will cumulatively disturb five (5) acres or more requires a General Permit for the Discharge of Stormwater from the CT DEP.

- Project will not disturb more than 5 acres.
- Project will disturb more than 5 acres and a copy of the General Permit Registration will be supplied to the Town prior to the start of any construction on the site.

23. CONSERVATION COMMISSION INFORMATION.

a. Is the property enrolled in any local or state forest, open space or farm tax abatement program? _____. If yes, then please describe: _____

b. Have any prior proposals and/or applications been submitted for this site? _____. If yes, please describe (attach additional sheets if necessary).

c. Identify all adjacent property owners, any known dedicated or managed open space (e.g., Madison Land Conservation Trust, Subdivision Open Space), and any conservation easements (e.g., Madison Land Conservation Trust, Nature Conservancy) and indicate locations on the Plan(s). _____

d. WATERSHED. Identify the Subregional Drainage Basin in which the property is located and indicate the boundaries on the Plan(s). _____ (Boundary maps are available for viewing in the Land Use Office or on the CT DEP website, www.ct.gov/dep.)

e. UNIQUE HABITATS/SPECIAL AREAS. Site has does not have Unique Habitats or Special Areas as identified by DEP and/or the Town of Madison Plan of Conservation and Development. (DEP information available at CT DEP website, www.ct.gov/dep, Natural Resources Endangered Species link). If yes, provide details and indicate the location on the Plan(s). _____

f. HISTORIC RESOURCES. Does the property contain any of the following? Check all that apply.

- Archaeologically significant sites
- Historically significant sites (e.g., iron works, mill sites)
- Stone walls

Locate on the Plan(s) and describe in the space below. For information on archaeological sites, contact the Office of State Archaeology (State Archaeologist Nicholas Bellantoni, phone 860-486-5248, email nicholas.bellantoni@uconn.edu).

g. RECREATIONAL RESOURCES. Does the property contain, or is it adjacent to, any of following? Check all that apply.

- Maintained trails
- Recreational areas
- Other: _____

Locate on the Plan(s) and describe in the space below. (Information may be obtained from the Madison Land Conservation Trust, the Regional Water Authority, the Madison Recreation Department, the Madison Plan of Conservation and Development.) _____

h. SCENIC RESOURCES. Does the property contain any scenic vistas, scenic areas, or scenic roads? _____ If yes, locate on the Plan(s) and describe in the space below. _____

i. Attach any additional information which may be helpful to the Commission's review.

NOTE: This Activity may be subject to additional approvals from one or more Town, State, or Federal agencies. It is the responsibility of the applicant to determine which, if any, additional approvals are required and to submit appropriate applications. These additional agencies may include, but are not limited to, the U.S. Corp of Engineers, various units of the Connecticut Department of Environmental Protection, and the Madison Planning and Zoning Commission.

AS PER SEC. 4.3 OF THE INLAND WETLANDS AND WATERCOURSES REGULATIONS OF THE TOWN OF MADISON, MOVEMENT OF EQUIPMENT IN OR THROUGH WETLANDS OR WATERCOURSES IS SUBJECT TO APPROVAL BY THE INLAND WETLAND ENFORCEMENT OFFICER.

24. SIGNATURES REQUIRED ON THIS APPLICATION. The following is the legal agreement regarding application approvals which must be signed by the applicant and by the owner, if different from the applicant.

The undersigned hereby applies for approval of the foregoing and declares that the statements contained in this application and in all documents and/or drawings submitted as part of same are, to the best of his/her knowledge and belief, true and accurate as presented, and is aware of the penalties for obtaining a permit through deception or through inaccurate or misleading information.

Further, as owner, the undersigned agrees to the proposed activity described in this application, and covenants and grants hereby permission to the Madison Inland Wetlands Agency and its duly authorized agents to enter upon the property proposed for the development for purposes of inspection and enforcement of the Inland Wetlands Regulations of the Town of Madison, provided that prior notice of such inspection is given. (*Includes IWA Enforcement Officer, Assistant IWA Enforcement Officer, Inspector, Agency appointed scientists or parties who have filed Notice of Intervention with the Agency.)*

APPLICANT(S)/CORPORATE OFFICER(S)

<i>Signature</i>	<i>Print Name</i>	<i>Date</i>
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<i>Signature</i>	<i>Print Name</i>	<i>Date</i>
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OWNER(S)/CORPORATE OFFICER(S) IF DIFFERENT FROM APPLICANT

<i>Signature</i>	<i>Print Name</i>	<i>Date</i>
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<i>Signature</i>	<i>Print Name</i>	<i>Date</i>
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AGENT(S) IF APPLICABLE

<i>Signature</i>	<i>Print Name</i>	<i>Date</i>
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<i>Signature</i>	<i>Print Name</i>	<i>Date</i>
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