

Property within 500' of adjoining Town boundary? _____
If so, which town(s)? _____
Date the notice was sent by KIWWC to town clerk of adjoining municipality(ies) _____
Receipt date of copy of Applicants notice to adjoining municipality _____

(# 21-000811)
Application #: 21-1526
Date Submitted: 7/8/21
Date of Receipt by Comm.: _____
Fee: \$160.00 Check # 1050
Staff Initials: LB ZEO

KILLINGLY INLAND WETLANDS & WATERCOURSES COMMISSION APPLICATION

A \$100.00 base fee (or, for a proposed subdivision, \$100.00 per lot, whichever is greater) plus \$60.00 state fee must accompany each application (Total fee: \$160.00). **THIS FEE IS NON-REFUNDABLE.** Checks or money orders should be made payable to the Town of Killingly. **Public hearing fee: \$225.00** required in addition to the above fees if a public hearing is required by the commission(s) and not already included.

TO BE COMPLETED BY THE APPLICANT – PLEASE PRINT

Applicant's Name: RAYMOND & DIANE SOREL
Day Phone #: 860-514-4230 Evening Phone #: _____
Mailing Address: 1645 NORTH RD DAYVILLE 06241
Owner of Record: SAME
Mailing Address: _____ Phone #: _____

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

Authorization of property owner: _____

LOCATION OF PROPERTY:

House # and Street: 1645 NORTH RD
Tax Map Number: 21 Block: _____ Lot: 20
Zoning District: RURAL DEVELOPMENT Lot Size: 50.07 AC Lot Frontage: _____
Easements and/or deed restrictions: _____

PURPOSE:

Provide the purpose and description of the proposed activity, including a list of all proposed regulated activities:

PROPOSED 2 LOT RESUBDIVISION WITH EXISTING HOUSES, WELLS, SEPTIC SYSTEMS AND DRIVEWAYS. NO NEW DEVELOPMENT PROPOSED. NO REGULATED ACTIVITIES

ON-SITE WETLANDS AND WATERCOURSES:

Windham County wetland soil types and areas of each type: _____

Watercourse(s) – type (pond, stream, marsh, bog, drainage ditch, etc.), manmade or natural, and area of each:

SEASONAL STREAM

ALTERNATIVES:

List alternatives considered by the applicant and state why the proposal to alter wetlands as set forth in the application is necessary and was chosen:

NO PROPOSED ACTIVITIES OR DISTURBANCE

MATERIALS:

Provide the volume (cubic yard) and nature of materials to be deposited and/or extracted:

NA

MITIGATIVE MEASURES:

List measures to be taken to minimize or avoid any adverse impact on the regulated area:

NA

BIOLOGICAL EVALUATION:

Describe the ecological communities and functions of the wetlands or watercourses involved with the application and the effects of the proposed regulated activities on these communities and wetland functions:

SITE PLAN*:

Scale 1"=40' showing existing and proposed conditions in relation to wetlands and water courses to include, but not be limited to:

- Contours
- Buildings
- Wells
- Driveways
- Septic Systems
- Drainage Systems (Including Culverts, Footing and Curtain Drains)
- Erosion and Sedimentation controls
- Wetlands
- Watercourses
- Areas of Excavation and /or Material Deposit

**Refer to Section 6.0 – Application Information Requirements and Section 7.0 – Application Evaluation Criteria of the Killingly Inland Wetlands & Watercourses Commission Regulations for information the Commission may require. Professionally prepared plans (Licensed Land Surveyor/Professional Engineer registered in the State of Connecticut, Soil Scientist) may be required for significant activities.*

ADDITIONAL INFORMATION:

List additional information submitted by the applicant:

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 Killingly, Killingly Inland Wetlands & 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: Raymond J. Sorel Date: 7-8-2021

Owner of Record: _____ Date: _____