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:

Day Phone #: ___________________ Evening Phone #: ___________________

Mailing Address:

Owner of Record:

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:

Tax Map Number: ___________________ Block: __________ Lot: __________

Zoning District: __________ Lot Size: __________ 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:
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:

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:

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

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

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: ___________________________ Date: ___________________________

Owner of Record: ______________________________ Date: ___________________________
PROJECTS WITHIN A PUBLIC WATER SUPPLY WATERSHED OR AQUIFER AREA

“As required by Sections 8-3i and 22a-42f of the Connecticut General Statutes, ALL APPLICANTS, before a Town Board for any project within a public water supply aquifer and/or watershed area are required to notify a water company of any such proposed project by certified mail NO LATER THAN SEVEN (7) DAYS after the date of the application...”

For those within a Connecticut Water Company watershed, they need to file the attached updated Project Notification Form, which is required for applications for projects within their aquifer or watershed areas.

Said form is to be mailed, certified mail return receipt, to the following:

Jessica Demar, Environmental & Regulatory Compliance Coordinator
Connecticut Water Company
93 West Main Street
Clinton, CT 06413

(Office) 860.669.8636
(Fax) 860.669.9326
(Customer Service) 800.286.5700
Public Water Supply Watershed or Aquifer Area
Project Notification Form

Requirement:
All applicants before a municipal Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals, or Inland Wetlands Agency for any project located within a public water supply aquifer or watershed area are required by Section 8-3i and Sec. 22a-42 of the CT General Statutes to notify Connecticut Water Company of the proposed project by certified mail not later than 7 days after the date of the application. The notice should be sent to:
Jessica Demar, Environmental & Regulatory Compliance Coordinator, Connecticut Water Company, 93 West Main Street, Clinton, CT 06413 by Certified Mail, Return Receipt.

General Information:

1. Location map of the project site (please show enough information to locate site).

2. Site plans, including soil erosion and sediment control plan, which have been submitted to the town commission for review.

3. Project address

4. Total acreage of project site

5. Existing land use

6. Description of proposed project

7. Acreage of area to be disturbed including structures, additions, paving, and soil disturbance

8. Type of sanitary system (circle one): septic system / public sewer / none

9. Number of existing or proposed floor drains and their point of discharge e.g. sanitary sewer, holding tank, or ground

10. Water accessed by (circle one): private well / public water / none
   If other, please specify
11. Distance of site disturbance to nearest watercourse or wetland

12. Brief description of existing and proposed stormwater management system, including roof drainage, paved areas etc., and discharge points e.g. municipal sewers, drywells, streams, vegetated areas, detention basins etc.

13. Type of heat for facility

14. List of existing and proposed underground or above-ground storage tanks including age, capacity and contents

15. List of potentially harmful chemicals stored or used on property (existing and proposed) and typical onsite volumes, including but not limited to petroleum products, lubricants, solvents, detergents and pesticides

16. Describe any wastes generated and their means of disposal

17. Date application will be heard by Planning and Zoning Commission

18. Date application will be heard by Zoning Board of Appeals

19. Date application will be heard by Inland Wetlands Commission

20. Name, address and telephone number of contact person for the project:

Name of person completing form    Signature    Date
Watershed or Aquifer Area Project Notification Form

REQUIREMENT:

Within seven days of filing, all applicants before a municipal Zoning Commission, Planning and Zoning Commission, Zoning Board of Appeals or Inland Wetlands Commission for any project located within a public water supply aquifer or watershed area are required by Public Act No. 06-53 of the CT General Statutes to notify The Commissioner of Public Health and the project area Water Company of the proposed project by providing the following information.

To determine if your project falls within a public water supply aquifer or watershed area visit the appropriate town hall and look at their Public Drinking Water Source Protection Areas map. If your project falls completely within or contain any part of a public water supply aquifer or watershed you are required to complete the following information.

Note: You will need information obtained from the Public Drinking Water Source Protection Areas map located in the appropriate town hall to complete this form.

Step 1: Have you already notified the CT Department of Public Health (CTDPH) of this project?

☐ No, Go to Step 2

☐ Yes, I have notified DPH under a different project name - Complete steps 4-6

☐ Yes, same name different year - Notification Year __________ Complete steps 4-6

Step 2:

1. Name of public water supply aquifer your project lies within:

2. Name of the public water supply watershed your project lies within:

3. Public Water Supply Identification number (PWSID) for the water utility: CT

Step 3: For 1-5 Check all that apply

1. My project is proposing:

☐ Industrial use; ☐ Commercial use; ☐ Agricultural use; ☐ Residential use;

☐ Recreational use; ☐ Transportation improvements; ☐ Institutional (school, hospital, nursing home, etc.);

☐ Quarry/Mining; ☐ Zone Change, Please Describe:

☐ Other, Please describe:

2. The total acreage of my project is:

☐ Less than or equal to 5 acres ☐ Greater than 5 acres

3. My project site contains, abuts or is within 50 feet of a:

☐ Wetland; ☐ Stream; ☐ River; ☐ Pond or Lake
4. Existing use of my project site is:

☐ Grassland/meadow; ☐ Forested; ☐ Agricultural; ☐ Transportation; ☐ Institutional (school, hospital, nursing home, etc.); ☐ Residential; ☐ Commercial; ☐ Industrial; ☐ Recreational; ☐ Quarry/Mining

☐ Other Please Describe:

5. My project will utilize:

☐ septic system; ☐ existing public sewer; ☐ new public sewer; ☐ agricultural waste facility;

☐ existing private well; ☐ new private well; ☐ existing public water supply;

☐ new public water supply, if new have you applied for a certificate of public convenience and necessity from DPH? ☐ Yes ☐ No

6. My project will contain this percentage of built up area (buildings, parking, road/driveway, pool): ☐ Less than or equal to 20% ☐ Greater than 20% to 50% ☐ Greater than 50%

Step: 4 Applicants Contact Information:

Name:

E-mail address:

Telephone:

Fax number:

Step 5: Please provide the following if available:

Project name:

Project site address:

Town:

Project site nearest intersection:

Project site latitude and longitude:

E-mail completed form to dph.swpmail@ct.gov