

OPEN SPACE & CONSERVATION COMMISSION  
ROCKY HILL, CONNECTICUT  
INLAND WETLANDS AND WATERCOURSES  
APPLICATION FOR PERMIT

1. NAME OF APPLICANT \_\_\_\_\_

ADDRESS: \_\_\_\_\_

2. APPLICANT'S INTEREST IN PROPERTY: \_\_\_\_\_  
(describe - i.e., developer, etc.)

3. NAME(S) AND ADDRESS(ES) OF PROPERTY OWNER(S): \_\_\_\_\_

4. EXACT LOCATION OF PROPERTY: \_\_\_\_\_

(number of feet from nearest street intersection(s), etc.)

5. ASSESSOR'S MAP NUMBER \_\_\_\_\_, BLOCK NUMBER \_\_\_\_\_, PARCEL NUMBER \_\_\_\_\_

6. PROPOSED ACTIVITY(IES): \_\_\_\_\_

7. TOTAL AREA OF PARCEL \_\_\_\_\_ ACRES.

AREA OF INLAND WETLANDS ON THIS PARCEL \_\_\_\_\_ ACRES.

AREA OF INLAND WETLAND DISTURBANCE \_\_\_\_\_ ACRES.

NAME OF WATERCOURSE ON PARCEL \_\_\_\_\_

LINEAR FEET OF WATERCOURSE TO BE ALTERED \_\_\_\_\_

8. ATTACH WRITTEN DESCRIPTION OF NATURAL SOILS GROUP CLASSIFICATION(S).

The Applicant understands that this application requires all items of preliminary information which must be submitted to the Inland Wetlands and Watercourses Agency at least twenty one (21) days prior to a regularly scheduled Agency meeting.

All information submitted for review shall be considered factual, or in the case of an anticipated activity, binding. A knowing failure of the Applicant or of any of his, her, or its agency to provide correct information, or performance exceeding the levels of activity anticipated, shall be sufficient grounds for the revocation of any permit issued under these Regulations. Permits are valid for five (5) calendar years from date of issue.

The undersigned(s) warrant the truth of all statements contained herein and in all supporting documents according to the best of his, her or their knowledge and belief. The undersigned grants permission to the Agency and its Agents for the purposes of reviewing and inspecting the parcel.

\_\_\_\_\_  
(Applicant) (Date Signed)

\_\_\_\_\_  
(Owner's Authorization) (Date Signed)

\_\_\_\_\_  
(Authorized Agent) (Date Signed)

\_\_\_\_\_  
(Form Received for Agency by) (Date)

\_\_\_\_\_  
(Address of Authorized Agent)

Date: \_\_\_\_\_  
Application declared complete by Company