



Town of Coventry  
Inland Wetlands Agency



Application to Conduct Regulated Activity

Applicant: MARK WHEATON Phone: 860 212 7786

Address: 101 WEST ST, EASTHAMPTON, MA 01027

Owner: MARK WHEATON Phone: 860 212 7786

Address: 101 WEST ST, EASTHAMPTON, MA 01027

Agent: MARK WHEATON Phone: 860 212 7786

Address: 101 WEST ST, EASTHAMPTON, MA 01027

**All correspondence for this application will be sent to the applicant and it will be their responsibility to notify all others named on this application regarding changes to plans, meetings notices, etc.**

Location of Activity (location map to be included on site plan):

Street Address: GRANT HILL RD COVENTRY CT

Map: 5 Block: 14 Lot#: 16-1

Description of Project:  
WHEATON 3 LOT SUBDIVISION

(Use Separate paper if more space is needed.)

List of Regulated Activities:

Square Feet of Wetlands,  
Watercourse and/or Regulated  
Area Impacted:

1. <u>LOT 3 DRIVEWAY</u>	<u>8500 sq ft</u>
2. <u>FOOTING DRAIN LOT 1</u>	<u>800 sq ft</u>
3. <u>FOOTING DRAIN LOT 2</u>	<u>800 sq ft</u>
4. <u>SEPTIC RESERVE LOT 1</u>	<u>400 sq ft</u>

Certification by Applicant: (Please check as appropriate)

1. Is any portion of the property on which the regulated activity is proposed located within 500 feet of an adjoining municipality?  Yes  No

*If the answer is yes you must send notice of the application by certified mail, return receipt requested, on the same day as filed, to the inland wetlands agency of the adjoining municipality. Documentation of such notice shall be provided to the Coventry Inland Wetlands Agency.*

2. Will any traffic attributable to the completed project on the site use streets within the adjoining municipality to enter or exit the site?  Yes  No
3. Will sewer or water drainage from the project site flow through and impact the sewage or drainage system within the adjoining municipality?  Yes  No
4. Will water run-off from the improved site impact streets or other municipal or private property within the adjoining municipality?  Yes  No
5. Is any portion of the inland wetland or watercourse on which a regulated activity proposed within the mapped watershed boundary of a water company as defined by Section 16-1 of the Connecticut General Statutes?  Yes  No

*If the answer to 5 is yes, notice to the water company by the applicant shall be made by certified mail, return receipt requested, within seven days of the filing of the application. Documentation of such notice shall be provided to the Agency.*



The undersigned applicant hereby grants permission to the Agency and its Agent to conduct any necessary inspection of this property, at reasonable times, both before and after the permit in question has been granted by the Agency/Agent.

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.

OWNER'S SIGNATURE: Mr. D. Weach DATE: 5/21/20  
(Required)

APPLICANT'S SIGNATURE: Mr. D. Weach DATE: 5/21/20

FEE PAID: \$310.00 \* This fee does not include Agent or Town Engineer's Fee.

For Office Use Only	
Date Received in Office: _____	* Fee Paid: _____
Date Received by Inland Wetlands Agency: _____	
Public Hearing Required: <input checked="" type="checkbox"/> Yes	Date: _____ <input type="checkbox"/> No

\*See attached fee schedule.





CONNECTICUT DEPARTMENT OF ENVIRONMENTAL PROTECTION  
79 Elm Street  
Hartford, CT 06106-5127

GIS CODE #: \_\_\_\_\_  
For DEP Use Only

Gina McCarthy, Commissioner

## Statewide Inland Wetlands & Watercourses Activity Reporting Form

Please complete and mail this form in accordance with the instructions. Please print or type.

### PART I: To Be Completed By The Inland Wetlands Agency Only

1. DATE ACTION WAS TAKEN: Year \_\_\_\_\_ Month \_\_\_\_\_
2. ACTION TAKEN (circle one):      A          B          C          D          E          F          G          H
3. WAS A PUBLIC HEARING HELD? Yes \_\_\_\_\_ No \_\_\_\_\_
4. NAME OF AGENCY OFFICIAL VERIFYING AND COMPLETING THIS FORM:  
(print) \_\_\_\_\_ (signature) \_\_\_\_\_

### PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant

5. TOWN IN WHICH THE ACTION IS OCCURRING: COVENTRY  
Does this project cross municipal boundaries? Yes \_\_\_\_\_ No X  
If Yes, list the other town(s) in which the action is occurring: \_\_\_\_\_
6. LOCATION: USGS Quad Map Name: ROCKVILLE AND Quad Number: 39  
Subregional Drainage Basin Number: 3106
7. NAME OF APPLICANT, VIOLATOR OR PETITIONER: MARK WHEATON
8. NAME & ADDRESS/LOCATION OF PROJECT SITE: GRANT HILL RD  
Briefly describe the action/project/activity: WHEATON 3 LOT SUBDIVISION
9. ACTIVITY PURPOSE CODE: B
10. ACTIVITY TYPE CODE(S): 12, 14, 9, 2
11. WETLAND / WATERCOURSE AREA ALTERED [must be provided in acres or linear feet as indicated]:  
Wetlands: 0 acres      Open Water Body: 0 acres      Stream: 0 linear feet
12. UPLAND AREA ALTERED [must be provided in acres as indicated]: .25 acres
13. AREA OF WETLANDS AND / OR WATERCOURSES RESTORED, ENHANCED OR CREATED: 0 acres  
[must be provided in acres as indicated]

DATE RECEIVED:

**PART III: To Be Completed By The DEP**

DATE RETURNED TO DEP:

FORM COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO