



City of Middletown Department of Land Use

245 deKoven Drive
Middletown, CT 06457
(860)638-4590
www.MiddletownCT.gov

INLAND WETLANDS AND WATERCOURSES AGENCY APPLICATION

Location Information

Project Address: _____

Map: _____ Lot: _____ Parcel ID: _____ Zone: _____ Lot Area: _____

City Water: City Sewer: Private Well: Private Septic:

Number of Acres of wetlands (or portion thereof) on the property: _____
 Total acreage of wetlands or linear feet of watercourse to be altered: _____

Total area of impacted regulated area: _____
 Name of Certified Soil Scientist: _____

Applicant Information

Name: _____ Firm Name: _____

Street Address: _____ City: _____ ST: _____ Zip: _____

Email: _____ Phone: _____

Signature: _____ Date: _____

Property Owner(s) Information

Same as Applicant:

Name: _____ Principal: _____

Street Address: _____ City: _____ ST: _____ Zip: _____

Email: _____ Phone: _____

Signature[†]: _____ Date: _____

Description of Project: _____

If more space is needed, then please provide a separate narrative document.

[†] Authorizing the applicant to apply on the owner's behalf and authorizing any town official and/or employee that the town deems necessary may enter the property to verify information submitted with this application. Subject property owner and applicant affirm that all information provided in this application is complete and accurate and that any permit obtained through deception, inaccurate or misleading information is subject to revocation as well as all civil and/or criminal penalties enforceable by law.

To be completed by Land Use Staff only:

Fee Paid \$ _____ Check # _____

Received by: _____

Application # _____

Property is within 500 feet of a municipal boundary of: _____

Estimated time land will be disturbed during construction: _____

Check applicable activities occurring within 0-100 feet from wetland or watercourse:

Removal Filling Surface Water Diversion

Paving Vegetation Removal

Discharge (Specify Type): _____ Other (Specify Type): _____

Explain in detail extent of any activity checked above and type of material:

What alternatives have been considered in connection:

What Local, State, or Federal permits were previously issued or that will be required for work on the property:

Decisions:

Application # _____

Approved Approved w/Conditions Denied

Approved Plan Date: _____

Agent Approval

Date

Staff Notes and Conditions:

