7/24/20	Date of Receipt
150,60	Fee and Date Paid

# 100 62	
4 +20-03	_File Number
	Approval Date

## TOWN OF NORTH HAVEN INLAND WETLANDS COMMISSION



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

			•		
GIS CODE #:	 	 _		_	 -

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: North Haven
	Does this project cross municipal boundaries? Yes No
i	If Yes, list the other town(s) in which the action is occurring:
6.	LOCATION: USGS Quad Map Name: Wallingfold AND Quad Number:
	Subregional Drainage Basin Number: 5200-20
7.	NAME OF APPLICANT, VIOLATOR OR PETITIONER:
l	NAME & ADDRESS/LOCATION OF PROJECT SITE: Bradz Subdivision, Syndown Place, 15 Cotton Tail la
	Briefly describe the action/project/activity: Subdivide Existing Lat Into 6 Lats with houses
9.	ACTIVITY PURPOSE CODE:
į.	ACTIVITY TYPE CODE(S):
R.	WETLAND / WATERCOURSE AREA ALTERED [must be provided in acres or linear feet as indicated]:
	Wetlands: acres
12	UPLAND AREA ALTERED [must be provided in acres as indicated]: 106 acres
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1	AREA OF WETLANDS AND / OR WATERCOURSES RESTORED, ENHANCED OR CREATED: acres [must be provided in acres as indicated]
<u></u>	
	DATE RECEIVED: PART III: To Be Completed By The DEP DATE RETURNED TO DEP: