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APPLICATION FOR PERMIT FOR USE OF INLAND WETLANDS AND WATERCOURSES OR UPLAND REVIEW/BUFFER AREAS Lisbon, Connecticut

יווססטווי, כ	Omiecucul
NAME OF APPLICANT:	
_ Jonathan Krug	To be completed by Commission:
	Application No.:
	Date of Receipt:
ADDRESS OF APPLICANT:	Date of Receipt: Application Fee:
Home: 163 Mell rd Lisbon, C	
Business:	
NAME OF PROPERTY OWNER: Longthan K	iracj
ADDRESS:	
TELEPHONE: Applicant	Owner 860 334 9445
**Written consent must be attached if Applicant is not to **Written description of functions of Wetlands and Water	ha proporty away
PURPOSE AND DESCRIPTION OF PROPOSED ACTIVITY, additional sheet if needed) Excavated hole is Drainage pipe / inspection of water and yard are washing out From Anticipated Completion 12/01/2022.	n front yard in search of Existing
	,
GEOGRAPHICAL LOCATION OF PROPERTY TO BE AFFEC LIMITED TO, A DESCRIPTION OF THE LAND IN SUFFIC INLAND WETLANDS AND WATERCOURSES AND UPLAN needed)	
	•
*	
I hereby certify that I am familiar with all the information penalties for obtaining a permit through deception or thro	n provided in this application, and I am aware of the augh inaccurate or misleading information.
Signed: Da	te: 2/34/2022

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LIST ALTERNATIVES TO APPLICATION PROPOSAL WHICH WERE CONSIDERED AND WHY THE APPLICATION PROPOSAL WAS CHOSEN: (Use additional sheet if needed)

ACREAGE OF WETLANDS AND WATERCOURSES ALTERED:	-
A. Soil type(s) (if available) [O ACRES]
ACREAGE OF WETLANDS OR WATERCOURSES CREATED:[O ACRES]
LINEAL FEET OF STREAM ALTERATION[O FEET]
TOTAL AREA OF WETLANDS ON PROJECT SITE	[OACRES]
TOTAL AREA OF UPLAND REVIEW/BUFFER ON SITE	[ACRES]
TOTAL LAND AREA OF PROPERTY	[<u>9.8</u> ACRES]
ATTACH SITE PLAN AS PRESCRIBED IN SECTION 7	
I, the property owner, hereby grant permission to the Inland to access the property involved in this application during its cany resulting permit. Signed: (Property Owner) ***********************************	consideration and during the implementation of Date: 2/24/2022
(To be completed by the Completed by the Completed by the Completed by the Complete Completed by the Complete C	
Application Approved: Date:	•
Conditions of Approval, if any:	<u>.</u>
Expiration Date:	
Extension Date:	•
Date of Review of Completed Work:	· · ·
Application Denied: Date:	
Reasons for Denial:	
Signature of Chairman or Secretary of Commission	

Existing Orive way over flow leachs Down Front Yourk Existing Drainage Pipe - appired approx, 30' + Opprex. " appred 33, from from 1111 Existing drain