PERMIT APPLICATION

Applicant's Name: Arthur H Howland & Associates, I	P.C. Date: July 16, 2021					
Activity Address: 99 West Shore Road						
APPLICATION FOR:						
Regulated activity: Proposed sanitary system & well						
Subdivision feasibility: # of lots						
Correction of a violation:						
	ne the period specified by Commission for remedial action.					
 Exemption: see separate form - Application fo 	·					
Other -specify:						
For O	FFICE USE ONLY					
Date Submitted: Received By:	Scanned					
Application #:	IWC Date of Receipt:					
Fee Paid: Cash Check#	Check date: By:					
Date (14 Days from Receipt)	65 Days from Receipt:					
Public Hearing Date:	Continued to:					
Extension Request Date : Date Extension Ends :						
ACTION TAKEN:						
Application Withdrawn Date:	Comment:					
Denied Without Prejudice Denied Date:						
☐ IWC Approval Date: ☐ Agent Approva	alDate:					

Please complete the entire form as applicable. Attach supporting documentation. The applicant is responsible for providing all pertinent information and may be required to supply additional information and/or pay for expert consultation, beyond what is outlined on this form. To save time and avoid rejection of an application, read and use the *Inland Wetland and Watercourses Regulations*, Town of Washington and the *Applicant's Guide to Completing and Processing an Application for an Inland Wetlands Permit* before applying.

Applications must be complete* and submitted to the Land Use Office no later than 7 calendar days before the next regular scheduled meeting to allow sufficient time for administrative, public, and commissioner review. The application will be considered at the next regularly scheduled meeting. **Complete** applications submitted to the Land Use Office later than the specified deadline for that meeting, may be added to the agenda at the discretion of the Commission. Consideration of late applications will await preliminary review by the administrative staff as time permits. The schedule of meetings and times is posted at the Town Hall and at www.WashingtonCt.org.

*To be considered "complete," the application must include:

- □ Yellow Mandatory Land Use Pre-Application Form signed by the property owner and if applicable, a letter from conservation easement holder
- □ All required forms, attachments and authorizations;
- □ Live (ink) signature(s) of the property owner(s);
- □ The Statewide Inland Wetlands and Watercourses Activity Reporting Form (Section II completed);
- □ A check, payable to the Town of Washington, for the **Application Fee** of \$60.00, **plus any other applicable fees from the posted Fee Schedule**, plus the required **State Tax** of \$60.00, **Total fee:** \$120.00.

ALL PLANS AND DRAWINGS MUST BE FOLDED TO FIT IN LEGAL SIZE FOLDER – UNFOLDED PLANS WILL NOT BE ACCEPTED

<u>S</u>	ECTION I: CONTACT INFORMATION
1)	Name of Owner: Michael Cesari & Kathleen Bernard
2)	Mailing Address: 99 West Shore Road
	City Washington State: CT Zip: 06777
3)	Telephone Home:(860-354-9346 Cell: ()
4)	Email: pszymanski@ahhowland.com
5)	Authorized Agent (attach mandatory written authorization): See attached
6)	Agent Address: 143 West Street, Suite E New Milford, CT 06776
7)	Agent's Home Telephone: () Business: (860) 354-9346
8)	Agent's Email: pszymanski@ahhowland.com
9)	Name, Address, Title and Phone Number of any Professional(s) or Contractor(s) to be involved in the project
	Paul Szymanski, PE C/o Arthur H Howland & Associates, PC 860-354-9346 143 West Street, Suite E, New Milford, CT 06776
10)	All correspondence, notices, permits shall be sent to: Property Owner Agent
10)	All correspondence, notices, permits shall be sent to. Thopetty Owner Wing Agent
SE	CTION II: PROPERTY INFORMATION
	Address of Property: 99 West Shore Road
	Assessor's Map, Lot Number(s): 11-09-11 & 36
	Total Acreage: 0.89
•	Located in a Historic District? ☐ Yes
5)	Applicant's Interest in Property (circle one): Owner Developer Option Holder
	Other (describe): Engineer
SE	CTION III: PROJECT/ACTIVITY INFORMATION
1)	Project/Activity Name (e.g. pond dredging, etc.): Proposed Sanitary system and well
2)	If the activity involves the installation or repair of a septic system(s):
	Has the Health Official approved the plan? ☑ Yes ☐ No
3)	Total Wetland Acres: 0 Disturbed Wetland Acres: 0
1)	Total Review Acres*: 0.88 Disturbed Review Acres: 0.2
	* The review area is all land within 100 feet of all wetlands soils and watercourses/water bodies. Activities
ey	rond the 100-foot review area, which have the potential to adversely affect wetlands and watercourses, are
also	o subject to wetlands jurisdiction and permitting requirements.
5)	Linear Feet of Watercourse: 180.53 Linear Feet of Watercourse disturbed: 0
	Square feet of proposed impervious surfaces (roads, buildings, parking, etc.): 0
7)	Does this project/activity comply with all applicable zoning regulations? ☑ Yes ☐ No

SECTION IV: PROJECT NARRATIVE

At	tach separate sheet(s) if necessary						
1)	Proposed Activity (detailed description): Proposed installation of a septic tank and pump chamber and well for an						
	existing single family home with grading and related appurtenances.						
2)	The proposed activity will involve the following within wetlands, a watercourse, and/or a review area:						
	Check all that apply:						
	☑ Alteration ☐ Construction ☐ Pollution ☐ Deposition of Materials						
	☐ Removal of Materials ☐ Bridge or Culvert ☐ Discharge To ☐ Discharge From						
	☐ Other (describe)						
2)	Amount, type, and location of materials to be removed, deposited or stockpiled:						
	300 cy fill and septic fill outside of upland review area. Within upland review area no fill or excavation						
3)	Description of proposed project, construction work sequence, machinery to be used, & duration of						
	activities: Proposed installation of a new sanitary system and well with related grading. This project will take approximately						
	1 to 3 months. Machinery to be used is a rubber track mini excavator and a skidsteer						
۸)	Describe alternatives considered and why the proposal described herein was chosen:						
4)	An alternative would have been to repair and expand the existing septic, but this would have caused more						
	earth disturbance in the regulated area						
	- Curti distarbance in the regulated drea						
SE	CTION V: ADJOINING MUNICIPALITIES & NOTICE						
1)	Check whether any of the following circumstances apply **						
	☐ A portion of the property affected by the decision of the Commission is located within five hundred						
	(500) feet of the boundary of an adjoining municipality.						
	A portion of the sewer or water drainage from the project site will flow through and significantly impact the sewage system within the adjoining municipality.						
	☐ Water run-off from the improved site will impact streets or other municipal or private property within						
** f	the adjoining municipality. any of these situations apply (are checked), the applicant is required to give written notice of his/her						
apr	olication to the Inland Wetlands Agency of the adjoining municipality, on the same day that he/she						

submits this application. Notification must be by Certified Mail with Return Receipt Requested.

SECTION VI: ATTACHMENTS

Please attach the follow	wing along with a	any other	pertinent i	nformation
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1)An 8.5" x 11" photocopy of the pertinent section of the USGS topographic quadrangle with the property outlined or pinpointed. *Note: USGS Topographic Quadrangle Map is available in the Land Use Office.*

2) Scale drawings of the project and property that show the project in detail. They should include the following:

a. Title block with project name, owner, date, total acres, address, and map drafter. b. North arrow
c. Scale bar
d. Legend
e. Property lines
f. Wetland boundaries
g. Watercourses with direction of flow, water depth, & bottom characteristics (if applicable)
h. Edge of review area/100' setback.
i. Topographic contour lines
j. Dimensions and exact locations of proposed activities including material and soil stockpiles,
erosion and sedimentation controls, ingress and egress patterns
k. Existing and proposed vegetation, including limit of disturbance line.

- 3) If a Soil Scientist is involved, his/her name, written report, and field sketch.
- 4) The Commission may, at its discretion, require an A-2 Survey showing wetland boundaries that have been flagged by a Certified Soil Scientist (CSS) and surveyed and plotted by a Licensed Surveyor.

SECTION VII: CONSENT AND SIGNATURE(S)

The undersigned, as owner(s) of the property, hereby consents to necessary and proper inspections of the above mentioned property by Commissioners and agents of the Inland Wetlands Commission, Town of Washington, at reasonable times, both before and after a final decision has been issued by the Commission. The undersigned hereby certifies that the information provided in this application, including its supporting documentation, is true and he/she is aware of the penalties provided in Section 22a-376 of the Connecticut General Statutes for knowingly providing false or misleading information.

General Statutes for knowingly providing false or misleading info	rmation.
Print Name of Property Owner Signature of Property Owner (live ink)	Date
Print Name of Property Owner	
x Michael Coszin	7/8/2021
Signature of Property Owner (live ink)	Date

IN ORDER TO EXPEDITE THE PERMITTING PROCESS IT IS NECESSARY TO FILL OUT ALL SECTIONS OF THIS APPLICATION COMPLETELY.

INCOMPLETE APPLICATIONS CANNOT BE PROCESSED

ALL PLANS AND DRAWINGS MUST BE FOLDED TO FIT IN LEGAL SIZE FOLDER – UNFOLDED PLANS WILL NOT BE ACCEPTED



CIVIL ENGINEERS LAND SURVEYORS SOIL SCIENTISTS LAND PLANNERS

LETTER OF TRANSMITTAL

To: Tov	wn of Washingto	on Wetlands	DATE : July 16, 2021				
			J OB #: 6790				
R E: 99 V	West Shore Road	1					
X ATTACHE		EPARATE COVER TTER ☐ PRINTS ☐	SPECIFICATIONS				
COPIES	DATE		DESCRIPTION				
6		Proposed Sanitary Disp	osal System & Soil Erosion Control Plan				
6		Application & Supporting	ng Documents				
1		Check # 2821 \$120.00					
	:	·					
X AS REQUE	ESTED		W & COMMENT X FOR APPROVAL NOTED ☐ RETURNED FOR CORRECTIONS				
Thank you							
Sincerely, Arthur H. H	Iowland & Ass	ociates, P.C.					
Heather Fleet Office Manager cc:							



GIS CODE #: For DEEP Use Only							_	
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79 Elm Street • Hartford, CT 06106-5127

www.ct.gov/deep

Affirmative Action/Equal Opportunity Employer

Statewide Inland Wetlands & Watercourses Activity Reporting Form

Please complete and mail this form in accordance with the instructions on pages 2 and 3 to:

DEEP Land & Water Resources Division, Inland Wetlands Management Program, 79 Elm Street, 3rd Floor, Hartford, CT 06106

Incomplete or incomprehensible forms will be mailed back to the inland wetlands agency.

	PART I: Must Be Completed By The Inland Wetlands Agency
1.	DATE ACTION WAS TAKEN: year: month:
2.	ACTION TAKEN (see instructions, only use one code):
3.	WAS A PUBLIC HEARING HELD (check one)? yes ☐ no ☐
4.	NAME OF AGENCY OFFICIAL VERIFYING AND COMPLETING THIS FORM:
	(print name) (signature)
	PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant
5.	TOWN IN WHICH THE ACTION IS OCCURRING (print name): Washington
	does this project cross municipal boundaries (check one)? yes ☐ no ☑
	if yes, list the other town(s) in which the action is occurring (print name(s)):
6.	LOCATION (see instructions for information): USGS quad name: New Preston or number: 47
	subregional drainage basin number: 6502
7.	NAME OF APPLICANT, VIOLATOR OR PETITIONER (print name): Arthur H Howland & Associates, P.C.
8.	NAME & ADDRESS / LOCATION OF PROJECT SITE (print information): 99 West Shore Road
	briefly describe the action/project/activity (check and print information): temporary ☐ permanent ☑ description: Installation of a new sanitary system and well to serve the existing home
9.	ACTIVITY PURPOSE CODE (see instructions, only use one code):
10.	ACTIVITY TYPE CODE(S) (see instructions for codes): 1, 2, 10, 12
11.	WETLAND / WATERCOURSE AREA ALTERED (must provide acres or linear feet):
	wetlands: 0 acres open water body: 0 acres stream: 0 linear feet
12.	UPLAND AREA ALTERED (must provide acres): 0.2 acres
13.	AREA OF WETLANDS / WATERCOURSES RESTORED, ENHANCED OR CREATED (must provide acres): 0 acres
DA	TE RECEIVED: PART III: To Be Completed By The DEEP DATE RETURNED TO DEEP:
FO	RM COMPLETED: YES NO FORM CORRECTED / COMPLETED: YES NO

WASHINGTON CONNECTICUT SUBREGIONAL BASINS AND SURFACE WATER FLOW DIRECTIONS

Explanation

Town Boundary

Subregional Watershed Boundary

4201 Subrg. Basin ID# - as designated by CTDEP

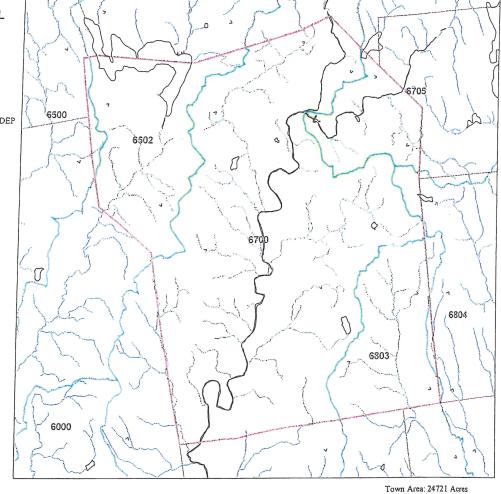
Watercourse Open Water

Sasin Outlet

Surface Water Flow Direction

The table provides statistics for each subregional basin. Shown are the areas of the basin within the town, the percentage for that area, and the percent of the town covered by each basin.

Sbar_no	AcresinTw	Percotus	Persoft
6500	183.58	1.5	0.7
6502	3928.07	24.3	15.9
6700	15422.9	34.0	62.4
6705	1916.12	7.4	7.8
6803	2946.57	42.0	11.9
6804	323 69	3 1	1 3

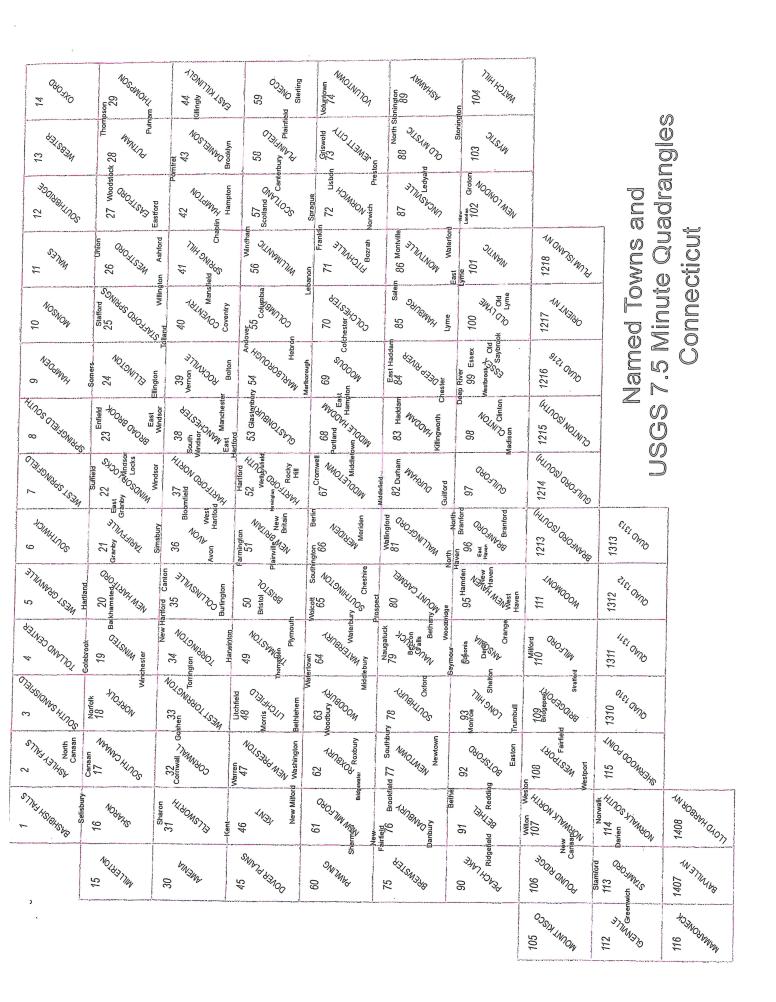






Digital layers provided by the CTDEP. Map composed by the NEMO project. For educational purposes only. 0 1 Miles

The University of Connecticut, CES: November 02, 1999



TOWN OF WASHINGTON

MANDATORY LAND USE PRE-APPLICATION FORM

This form is required for all health, wetlands, zoning, planning, and building applications except for interior or exterior work on existing buildings, which in no way expands or alters the footprint.

No planning, zoning, inland wetlands and watercourses, or historic district commission; health department; building; or zoning board of appeals application for a permit may be filed until the holder(s) of any conservation restriction or preservation restriction on the subject property has been notified. Please see the State legislation in its entirety, reprinted for your convenience on the reverse of this form, Public Act 05-124, Effective October 1, 2005.

Provide the legal name of the property owner(s) and the street address of the property for which one of the above applications will be submitted, then complete either section A or B below.

Property Owner(s) of Record Michael Cesair + Kathken Bernard
Subject Property Address 99 West Shore Road
A. I hereby certify that there are no conservation easements or restriction, nor any preservation restrictions on the above-referenced property. Date D
Signature of Property Owner A Dave 07/11/21
B. There are conservation easements or restriction, or preservation restrictions on the above-referenced property.
The name of the easement or restriction holder is
The phone number of the easement or restriction holder is
You must obtain and attach one of the following:
(1) proof that the easement or restriction holder was notified not less than 60 days in advance of the application by certified mail, return receipt requested, of the property owner's intent to apply

- for a planning, zoning, inland wetlands and watercourses, or historic district commission; health department; building; or zoning board of appeals permit, or
- (2) a letter from the easement or restriction holder verifying that the application is in compliance with the terms of the easement or restriction.

June 17, 2021

Mr. Michael Cesari 446 Abbey Road Mt. Tremper, New York 12457

To Whom It May Concern:

Please be advised that the office of Arthur H. Howland & Associates, P.C. is authorized to represent me before any and all agencies and commissions of the Town of Washington for the purpose of obtaining approval of any and all land use applications and permits at 99 West Shore Road, New Preston, Connecticut.

Sincerely Yours,

Michael Cesari

Owner



Summary

Acreage

Parcelld Location Address Map-Block-Lot 1067

0.89

Map-Block-Lot Use Class/Description Assessing Neighborhood Survey 99 WEST SHORE RD 11-09-11&36 Single Family Lake Area 75A/143B

\$356,720

\$441,220

Owner

Current Owner CESARI MICHAEL + BERNARD KATHLEEN 99 WEST SHORE RD NEW PRESTON, CT 06777

Current Appraised Value

		2020	2019	2018	2017	2016
	+ Building Value	\$0	\$0	\$109,366	\$120,714	\$120,717
	+ OB/Misc	\$ O	\$0	\$ O	\$0	\$0
	+ Land Value	\$850,000	\$850,000	\$850,000	\$850,000	\$850,000
	= Total Appraised Value	\$850,000	\$850,000	\$959,366	\$970,714	\$970,717
Ass	sessment History					
		2020	2019	2018	2017	2016
	+ Building Value	\$0	\$0	\$76,560	\$84,500	\$84,500
	+ OB/Misc	\$0	\$0	\$0	\$ O	\$O

\$595,000

\$595,000

\$626,310

\$702,870

Land

Use	Class	Land Type	Zoning	Area	Value
Single Family	R	Waterfront Site W Shore1	R-3	0.89	\$850,000

\$595,000

\$595,000

Buildings Data

Land Value

Total Assessment

Building# Style

Style Contemporary
Actual Year Built 1970
Effective Year Built 1999
Living Area 1008
Stories 1.4

Exterior Wall Wood Shingles
Interior Wall Drywall
Roof Cover Arch Shingles

Roof Structure

Floor Type Carpet
Heat Type Baseboard
Fuel Type Electric

AC

Bdrms/Ful Bth/Hlf Bth/Ttl Rm 2/1/1/5
Basement Area 0
Basement Finished Area 0
Basement Garages 0

Building Sub Areas

 Description
 Year Built
 Area

 Wood Deck
 1990
 216

\$356,720

\$441,220

Sales History

Sale Date	Sale Price Deed Book/Page	Reason Valid	Sale Owner
6/21/2021	\$810,000 0253/0251	Yes	CESARI MICHAEL + BERNARD KATHLEEN

Permit Information

Permit ID	Issue Date	Type	Amount	Inspection Date	% Complete	Date Complete	Comments
22783	12-12-2019	Electrical	\$3,000	1/1/1900 12:00:00 AM	0	02-28-2020	WIRE BOAT HOUSE
22747	11-18-2019	Building	\$11,200	1/1/1900 12:00:00 AM	0	01-31-2020	REPL BOAT HOUSE NO WATER OR HEAT ONLY ELECTRIC

Sketch

	24	
30	1.4S FR-	
		$\left \cdot \right $
9	1S Deck-	

Photos



 $\textbf{No data available for the following modules:} Commercial \ Building, \ Out \ Buildings \setminus Extra \ Features.$

The Town of Washington Assessor makes every effort to produce the most accurate information possible. No warranties, expressed or implied are provided for the data herein, its use or interpretation. The assessment information is from the last certified tax roll. All other data is subject to change.

User Privacy Policy GDPR Privacy Notice

Last Data Upload: 7/7/2021, 8:18:02 PM

Developed by

Schneider

GEOSPATIAL

Version 2.3.128

New Milford Health Department 10 Main Street - Town Hall New Milford, CT 06776

telephone: (860) 355-6035

I O: Paul Szymanski, P.E.	Date: <u>6/2/2021</u>
FR: Suzanne Von Holt, Sanitarian	R.S. Signed: Sugarne Von West
RE: Review of Engineering Plan for 99 West Shore Road - Waashington Engineer: Paul Szymanski, P.E.	or Subsurface Sewage Disposal System located at: <u>n</u> Date Received: 6/8/2021

REASON FOR SUBMISSION:	
☐Minimum percolation rate poore☐High maximum ground water le☐Other: <u>Knock down-rebuild</u>	
DESIGN SPECIFICATIONS:	
Septic Tank <u>1000</u> gals. I	Design percolation rate <u>1.0-10</u> minutes/inch Leaching system <u>Mantis Double Wide=500 sf</u> Curtain drain <u>NA</u>
ACTION:	
site conditions meet the requiren Approval denied. Site unsuitable	provisions noted below. In is acceptable. No approval can be issued until ments of the Connecticut Public Health Code. for sewage disposal. formation on plan. Revise as noted and resubmit.
COMMENTS:	

This system does not provide for water softener discharges OR kitchen garbage grinders. 1. Septic system is to be installed. 2. Engineer to stake all components of the septic system prior to construction. 3. Engineer to approve quantity, quality and placement of C33 fill. A sieve ananysis is to be submitted to the Health Department. 4. Engineer to submit an as-built to the Health Department, including all pertiment elevations.