FEB - 2 2024



APPLICATION FOR PERMIT EAST LYME INLAND WETLANDS AGENCY

Office Use Only			
F	Gee Paid 1110.00 Date Submitted 2/	02/24 Application #	
I	Date of Receipt 2/6/24 Date Approved		
	\$ q4	YES NO Agent Approved: YES NO	
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No	te: In accordance with the Inland Wetland and Waterc	courses Regulations, Eleven (11) copies of all	
	olication materials must be submitted. 50 Gurley Roa	ad	
1.	SITE LOCATION (Street) and Description:		
	Assessor's Map 16.0 Lot # 56		
	Note: It is the applicant's responsibility to provide the correct site address land in sufficient detail to allow identification of the inland wetlands and watercourses to be disturbed, soil type(s), and wetland vegetation.	ess, map/lot number for the legal notice. Provide a description of the and watercourses, the area(s) (in acres or square feet) of wetlands and	
2.	APPLICANT: James Bernardo, LS		
	102A Spithead Road	860-447-0236 Phone:	
	Waterford, CT 06385	Fax:	
	Business:	Cell•	
		Email: jim@jbsurvey.com	
	Applicant's interest in the land:		
	**If the applicant is a Limited Liability Corporation or a Corporation provide the managing member's or responsible corporate officer's name, address, and telephone number. Douglas C. Hoagland OWNER:		
	Address:		
	Pawcatuck, CT 06379	Phone:	
	Email:	Fax: Cell:	
	**As the legal owner of the property listed on this application, I hereby a members and agents of the Agency to inspect the subject land, at reasonal the permit. Douglas C. Hoagland Owners Printed Name:	consent to the proposed activities. And I hereby authorize the able times, during the pendancy of the application and for the life of	
	Owners Signature: Date (A)	10/10/10/10	

4.	Area of wetland to be disturbed: Area of watercourse to be disturbed: Sq. ft. or ac		
	Will fill be needed on site? Yes No		
	If yes, how much fill is needed? Cubic yards		
5.	The property contains (circle one or more)		
	WATERCOURSE WATERBODY WOODED-WETLAND SWAMP		
	FLOODPLAIN OTHER:		
	Description of soil types on site: Canton and Charlton fine sandy loams		
	Description of wetland vegetation: See attached wetlands report		
	Name of Soil Scientist(s) and date of survey:		
6.	6. Provide a written narrative of the purpose and a description of the proposed activity and proposed erosion and sedimentation controls and other best management practices and mitigation measures which may be considered as a condition of issuing a permit for the proposed regulated activity including, but not limited to, measures to (1) prevent or minimize pollution or other environmental damage, (2) maintain or enhance existing environmental quality, or (3) in the following order of priority: restore, enhance and create productive wetland or watercourse resources. Depending on the complexity of the project, include the following: construction schedule, sequence of operations, drainage computations with pre and post construction runoff quantities and runoff rates, plans clearly showing the drainage areas corresponding to the drainage computation, existing wetland inventory and functional assessment, soils report, construction plans signed by a certified soils scientist, licensed surveyor, and licensed professional engineer.		
7.	Provide information of all alternatives considered. List all alternatives which would cause less or no environmental impact to wetlands or watercourses and state why the alternative as set forth in the application was chosen. All such alternatives shall be diagramed on a site plan or drawing. (Attach plans showing all alternates considered). Activity has no impact on wetlands or watercourses.		
8.	attach a site plan showing the proposed activity and existing and proposed conditions in relation to wetlands and vatercourses and identifying any further activities associated with, or reasonably related to, the proposed regulated ctivity which are made inevitable by the proposed regulated activity and which may have an impact on wetlands and vatercourses.		
9.	Provide the name and mailing addresses of adjacent landowners (including across a street). Attach additional sheets if necessary.		
	Name/Address: SEE ATTACHEO LIST		
	Name/Address:		
	Name/Address:		

The Agency shall revise or correct the information provided by the applicant and submit the form to the Commissioner of Environmental Protection in accordance with section 22a-30-14 of the Regulations of Connecticut State Agencies. 11. Name of Erosion Control Agent (Person Responsible for Compliance): Person in responsible charge will be provided at time of Zoning Permit Address: _____ Phone: Email: Cell:___ 12. Are you aware of any wetland violations (past or present) on this property? Yes If yes, please explain: 13. Are there any vernal pools located on or adjacent (within 500') to the property? Yes No 14. For projects that do not fall under the ACOE Category I general permit - Have you contacted the Army Corps of Engineers? Yes No 15. Is this project within a public water supply aquifer protection area or a watershed area? Yes No 16. If so, have you notified the Commissioner of the Connecticut Department of Public Health and the East Lyme Water and Sewer Department? Yes No (Proof of notification must be submitted with your application). 17. Attach the appropriate filing fee based on the fee schedule established in Section 19 of the Regulations. Fee: _____ (Make checks payable to 'Town of East Lyme'). 18. PUBLIC HEARINGS ONLY: The applicant must provide proof of mailing notices to the abutters prior to the hearing date. The undersigned Applicant hereby consents to necessary and proper inspection of the above mentioned property by the East Lyme Inland Wetlands Agency and/or its agents at reasonable times both before and after the permit in question has been granted. The Applicant affirms that the information supplied in this application is accurate to the best of his/her knowledge and belief. As the applicant I hereby certify that I am familiar with the information provided in this application and I am aware of the penalties for obtaining a permit through deception or through inaccurate or misleading information. Date: 12-28-23 Printed Name Signature: / Please note Above notice to be published in legal section of newspaper having general circulation in the Town of East Lyme. Applicant to pay cost of publication.

10. Attach a completed DEP reporting form.

You or a representative must attend the Inland Wetlands Agency meeting to present your application.

55.0/3-2////

55.0 3-1 EAST LYME LAND TRUST INC PO BOX 831 EAST LYME, CT 06333

57.0 1 SMITH DOROTHY B & PAUL N 17 FAULKNER DR QUAKER HILL, CT 06375 57.0 16 BURKE SHEILA OBYRNE TR 11 SMITH AVE NIANTIC, CT 06357

57.0 15 GIESE CAROL A 49 HOLMES RD EAST LYME, CT 06333 57.0 14 CASEY TERRENCE J & 55 HOLMES RD EAST LYME, CT 06333

57.0 29 RACICOT HEATHER L LONGO 38 HOLMES RD EAST LYME, CT 06333



~ CERTIFIED FORESTER/ SOIL SCIENTIST ~
PHONE 860-428-7992 ~ FAX 860-376-6842
426 SHETUCKET TURNPIKE, VOLUNTOWN, CT. 06384
FORESTRY SERVICES ~ WETLAND IMPACT ASSESSMENTS
WETLAND DELINEATIONS AND PERMITTING ~ E&S/SITE MONITORING
WETLAND FUNCTION/VALUE ASSESSMENTS

4/20/2023

MR. JIM BERNARDO BERNARDO SURVEYING LLC 102-A SPITHEAD RD. WATERFORD, CT. 06385

RE: WETLAND DELINEATION, 50 GURLEY ROAD, EAST LYME, CT.

DEAR MR. BERNARDO,

AT YOUR REQUEST I HAVE DELINEATED THE WETLANDS AND WATERCOURSE ON THE ABOVE REFERENCED PROPERTY.

THESE WETLANDS HAVE BEEN DELINEATED IN ACCORDANCE WITH THE STANDARDS OF THE NATIONAL COOPERATIVE SOIL SURVEY AND THE DEFINITIONS OF WETLANDS AND WATERCOURSES AS FOUND IN THE CONNECTICUT STATUTES, CHAPTER 440, SECTION 22A-38.

FLUORESCENT PINK FLAGS WITH A CORRESPONDING LOCATION NUMBER DELINEATE THE BOUNDARY OF THE UPLANDS AND WETLANDS/WATERCOURSE.

FLAG SERIES WF- 1 THROUGH WF-25 DELINEATE THE BOUNDARY OF A PALUSTRINE FORESTED WETLAND, THE HIGH WATER MARK OF THE NIANTIC RIVER, AND ITS ASSOCIATED FLOODPLAIN SOILS.

FLAG SERIES WF-1 A THROUGH WF-1 OA DELINEATE A PORTION OF THE NIANTIC RIVER AND ITS ASSOCIATED WETLAND AND FLOODPLAIN SOILS ON THE ADJACENT PROPERTY TO THE NORTH.

IN CONCLUSION, IF YOU HAVE ANY QUESTIONS CONCERNING THE DELINEATION OR THIS REPORT. PLEASE FEEL FREE TO CONTACT ME.

THANK YOU.

Joseph R. Theroux

JOSEPH R. THEROUX CERTIFIED SOIL SCIENTIST MEMBER SSSSNE, NSCSS, SSSA.



Promoting healthy communities

Date: 02/07/2024
To: James Bernardo L.S.

Subject Property: 50 Gurley Rd. East Lyme CT

Plan Designed by: Jim Bernardo L.S. Plan Date: 05/02/2023 Last Revision Date: 02/01/2024 Date Paid: 10/31/2023 The plan and associated information submitted to our office on 02/05/2024 for a proposed 3 bedroom residential building with private well and private septic at the above stated property, in the Town of East Lyme, CT is:

Approved w/conditions: Complies with the requirements of Section 19-13-B103 of the Connecticut Public Health Code; See conditions below.

Conditions:

- 1. A confirmation test pit shall be dug and observed by LLHD prior to inspection. This must be done in order to demonstrate >8' to ledge from the bottom of the proposed leaching (perc rate <1min/in). Currently 7.5' demonstrated. Test pit shall be dug to a minimum of 114" from grade.
 - a. If the test pit cannot be dug to 114", then the septic plan must be revised to demonstrate having 150' separating distance to all nearby wells.
- 2. Septc system area shall be staked and protected during construction, the proposed driveway is extremely close to the proposed leaching.
- 3. Floor plans only show one floor, this does not include a second story or basement. If the house plans (layout and/or footprint) are to change prior to permit issuance, these updated house plans and an updated septic plan shall be submitted to LLHD for review.
- 4. Sewer line from house to septic tank shall be inspected prior to the construction of the front porch.
- 5. PT #2 is labeled as TP #2 on sheet 2 depiction.
- 6. Stable benchmark adjacent to proposed building and sewage disposal system. Installer should not be required to transfer benchmarks when considerable differences (more than 10' to 15') exist between the benchmark and leaching area. If the benchmark is disturbed prior to construction, the engineer should set another one for construction purposes.

Notes/Recommendations:

- 7. Proposed garage shall have no footing/perimeter drains.
- 8. Footing/perimeter drains and discharge points shall remain >25 to septic system.
- 9. System length may be shortened to 50LF, which would still meet the required ELA for a 3 bedroom single-family house, MLSS is not applicable.
- 10. Minimum 6" of cover required over all septic components.
- 11. Design approved without a garbage grinder or large tub exceeding 100 gallons, if installed septic tank shall be sized accordingly.
- 12. All newly installed septic tanks shall have an approved non-bypass effluent filter that is rated for the design flow of the SSDS.
- 13. If a riser cover weighs less than 100 lbs, then the tank cover shall remain in place or a secondary safety lid or device shall be provided. It is recommended that secondary safety lids or devices be utilized for safety reasons even if the riser cover weighs 100 lbs or greater. Secondary safety lids or devices must be installed per manufacturer specifications and should be installed as shallow as possible to facilitate maintenance.





The following are not currently required by CT Public Health Code and/or LLHD Plan Review Policies but are encouraged/recommended to protect the proposed structures, onsite septic system, water treatment discharge system and/or water supply/groundwater.

- 1. All proposed well arcs should be kept on the property they serve (to allow neighbors full use of their properties) and all well casings should be located at least 10' from driving surfaces and/or structures to prevent future damage and allow for future maintenance of the wells.
- 2. It is strongly encouraged to keep the original tank covers on all tanks requiring risers to prevent the escape of sewer gases and prevent individuals from falling into tanks.
- 3. The designer should take into consideration the location of potential future water treatment discharge systems, rain gardens and footing/gutter drain discharge locations.

Additional Requirements and Recommendations:

Installer to submit scaled and/or tied as-built to LLHD upon 30 days of completion with distances to
flow line at house, inlet and outlet cover of tank, d-boxes, cleanouts and ends of leaching rows, well,
footing/curtain drains and between tie points. In addition, provide the name of installer, date, house
location and street/directional arrow.

*Please note that soils testing indicated on this plan are representative of actual soils conditions and additional deep test pits and percolation tests may be required by the Ledge Light Health District if the building or system location is altered and/or the suitable septic area is limited. Applicant should be aware that subdivision approval IS NOT sufficient for individual lot approval. Each lot must be reviewed by the Ledge Light Health District at the time of building permit application in order to obtain lot approval and issue a septic/well permit.

Please call me at 860-448-4882 ext 1316 with any questions regarding this matter.

Sincerely,

Joseph Blanchard, REHS/RS

Sanitarian II

Cc: Town of East Lyme Code Enforcement Officials