

APPLICATION FOR PERMIT EAST LYME INLAND WETLANDS AGENCY

Office U	Jse Only
Fee Paid Date Submitted	Application #
Date of Receipt Date Approved	Permit Number
Major Impact: YES NO Public Hearing	: YES NO Agent Approved: YES NO
Note: In accordance with the Inland Wetland and Was application materials must be submitted.	tercourses Regulations, Eleven (11) copies of all
1. SITE LOCATION (Street) and Description: 201 Old	Black Point Road
Assessor's Map 02.1 Lot # 13	
	address, map/lot number for the legal notice. Provide a description of the ds and watercourses, the area(s) (in acres or square feet) of wetlands and
2. APPLICANT: Old Black Point Association, Inc.	
Address: PO Box 260 Niantic CT 06357	Phone:
	Fax:
Business:	Cell:
	Email:
Applicant's interest in the land: <a href="</td"><td></td>	
**If the applicant is a Limited Liability Corporation or a Corpname, address, and telephone number.	oration provide the managing member's or responsible corporate officer'.
3. OWNER: <pre> <same applicant="" as=""> Robert Ferre</same></pre>	ira
Address: <same above="" as=""></same>	Phone:
	Fax:
Email: bferreira5@verizon.net	Cell:
**As the legal owner of the property listed on this application, I he members and agents of the Agency to inspect the subject land, at re the permit.	reby consent to the proposed activities. And I hereby authorize the asonable times, during the pendancy of the application and for the life of
Owners Printed Name: Robert Ferreira	
Owners Signature: Arberteury	Date: 3/1/24

4.	Area of wetland to be disturbed:	0.0	sq. ft. or ac			
	Area of watercourse to be disturbed:	0.0	sq. ft. or ac			
	Upland review area to be disturbed:		sq. ft. or ac sq. ft.	ac +/-		
	Will fill be needed on site? Yes	No				
	If yes, how much fill is needed? Appl	rox. 100	Cubic yards			
5.	The property contains (circle one or mor	re)				
<	WATERCOURSE	ERBODY WOODE	D-WETLAND SWAI	MP		
	OTHER: tid	<u>al marsh &</u> Long	Island Sound			
	Description of soil types on site: Beach sand, Pawcatuck mucky peat (tidal wetland), Woodbridge fine sandy loam (inland wetland)					
	Description of wetland vegetation:	/ooded, scrub br	ush			
	Name of Soil Scientist(s) and date of sur	vey: Richard Sn	arski CPSS June 3, 202	<u>21 and updated thro</u> ugh		
	February 5, 2024.					
6.	Provide a written narrative of the purpose sedimentation controls and other best me condition of issuing a permit for the proof or minimize pollution or other environment in the following order of priority: restored Depending on the complexity of the proof drainage computations with pre and post drainage areas corresponding to the drain report, construction plans signed by a certain of the proof of the purpose of the	anagement practices posed regulated actinental damage, (2) me, enhance and create ject, include the following construction runofinage computation, e	and mitigation measures which wity including, but not limited aintain or enhance existing en- eproductive wetland or water owing: construction schedule, f quantities and runoff rates, particularly and	ch may be considered as a to, measures to (1) prevent vironmental quality, or (3) course resources. sequence of operations, plans clearly showing the functional assessment, soils ed professional engineer.		
7.	Provide information of all alternatives compact to wetlands or watercourses and alternatives shall be diagramed on a site. The purpose of the project is to regulations for coastal resiliency.	state why the alterna plan or drawing. (A rebuild the beac	ernatives which would cause l tive as set forth in the applican tach plans showing all alterna n cabanas and decking t	less or no environmental tion was chosen. All such tes considered). to conform to FEMA		
8.	Attach a site plan showing the proposed watercourses and identifying any further activity which are made inevitable by the watercourses.	activities associated	with, or reasonably related to,	the proposed regulated		
9.	Provide the name and mailing addresses necessary.	of adjacent landowr	ers (including across a street).	Attach additional sheets if		
	Name/Address: See Attached>					
	Name/Address:					
	Name/Address:					

10. Attach a completed DEP reporting form.

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): Not available at this time. Once a contractor is selected, the contact information will be provided to the town. Address: Email: 12. Are you aware of any wetland violations (past or present) on this property? Yes (No) 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. Printed Name: Robert Ferreira Date: 3/1/24

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

Application for Permit East Lyme Inland Wetlands Agency

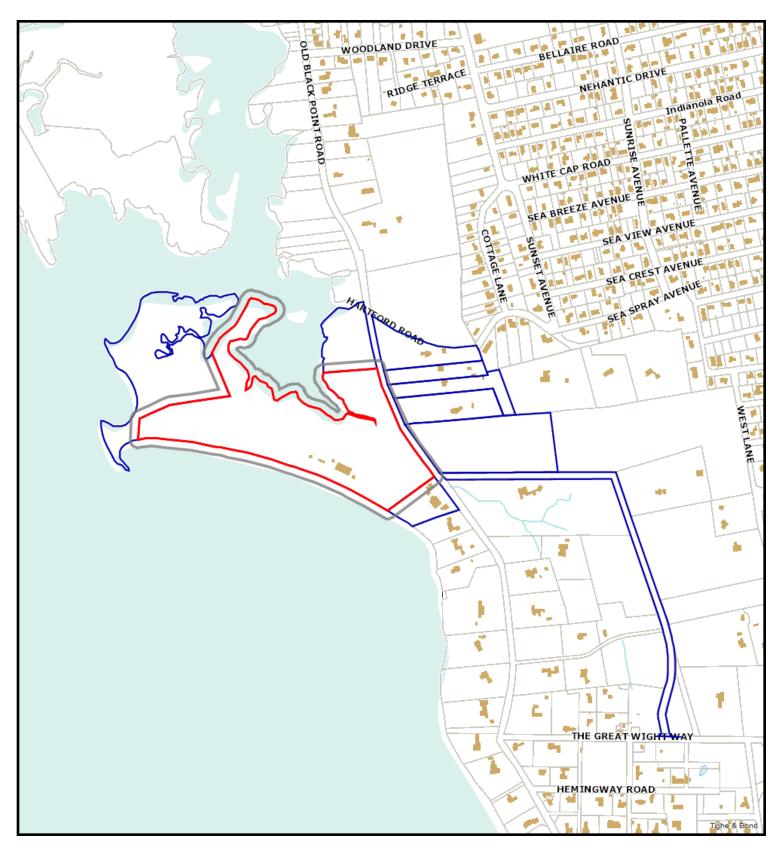
Old Black Point Beach Cabanas

Question 6.

This project entails the demolition of the existing beach cabanas and decking and reconstructing the structure to conform to current FEMA regulations and modern construction and accessibility standards along with other associated improvements as depicted on the site plan. The access driveway is proposed to be raised a maximum of one foot to reduce daily flooding – due to this approximately 100 cubic yards of fill will be needed within the footprint of the existing driveway. There are inland and tidal wetlands on the site as shown on the plan. No activity within in any wetland is proposed. A portion of existing excess pavement is proposed to be removed and planted as a buffer to the adjacent tidal wetland. A new code-compliant septic system will be installed.

Question 7.

Since this project does not involve any direct disturbance to any wetland area, alternatives need not be considered. This is a project that the Association is completing for safety purposes and coastal resilience.



Abutters to 201 Old BI Pt Rd

2/28/2024 1:04:40 PM

Scale: 1"=600'

Scale is approximate





The information depicted on this map is for planning purposes only. It is not adequate for legal boundary definition, regulatory interpretation, or parcel-level analyses.

Adjacent	Property Owners to 201 Old Black Pt. Rd				
Parcel ID	Owner Name	Owner Address	Owner City	Owner State	Owner Zip
05.3 21	FERGUSON ELEANOR EARLE	PO BOX 869	CHAPEL HILL	NC	27514
05.3 22	FERGUSON ELEANOR EARLE	PO BOX 869	CHAPEL HILL	NC	27514
05.3 18	GROARK EUNICE B ETAL	2042 WEST BRADLEY	CHICAGO	IL	60618
02.1 12	HERMANSON SUSAN T	209 OLD BLACK PT RD	NIANTIC	СТ	6357
05.3 19	MCINTYRE SIMON LOVAT ANGUS TR ETAL	473 FDR DRIVE K-1805	NEW YORK	NY	10002
04.4 22	NATURE CONSERVANCY INC	55 CHURCH ST	NEW HAVEN	СТ	06510-3029
05.3 1	NATURE CONSERVANCY INC	55 CHURCH ST	NEW HAVEN	СТ	06510-3029
02.1 13	OLD BLACK POINT ASSOC INC	P O BOX 260	NIANTIC	СТ	6357
02.1 38	OLD BLACK POINT ASSOC INC	PO BOX 260	NIANTIC	СТ	6357
05.3 20	ZINSSER AMY & JOHN WILLIAM	196 OLD BLACK PT RD	NIANTIC	СТ	6357



GIS CODE #:	 	 	 	
For DEEP Use Only				

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 this form in accordance with the instructions on pages 2 and 3 and mail 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.

	DADT I. Must De Completed Du 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 - one code only):
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 ACTIVITY IS OCCURRING (print name): East Lyme
	does this project cross municipal boundaries (check one)? yes no
	if yes, list the other town(s) in which the activity is occurring (print name(s)):,,
6.	LOCATION (see instructions for information): USGS quad name: Niantic or number: 101
	subregional drainage basin number:
7.	NAME OF APPLICANT, VIOLATOR OR PETITIONER (print name): Old Black Point Beach Association
8.	NAME & ADDRESS OF ACTIVITY / PROJECT SITE (print information): 201 Old Black Point Road
	briefly describe the action/project/activity (check and print information): temporary permanent description:
9.	ACTIVITY PURPOSE CODE (see instructions - one code only):
10.	ACTIVITY TYPE CODE(S) (see instructions for codes): 12,,,
11.	. WETLAND / WATERCOURSE AREA ALTERED (see instructions for explanation, 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):0.44+/ acres
13.	. AREA OF WETLANDS / WATERCOURSES RESTORED, ENHANCED OR CREATED (must provide acres): acres
DA	ATE RECEIVED: PART III: To Be Completed By The DEEP DATE RETURNED TO DEEP:
FC	DRM COMPLETED: YES NO FORM CORRECTED / COMPLETED: YES NO