



APPLICATION FOR PERMIT EAST LYME INLAND WETLANDS AGENCY

Office Use Only

Fee Paid \$610.00 Date Submitted 2/25/26 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 Watercourses Regulations, Eleven (11) copies of all application materials must be submitted.

1. SITE LOCATION (Street) and Description: 46 Brainerd Rd
07.4 20
Assessor's Map 07.4 Lot # 20

Note: It is the applicant's responsibility to provide the correct site address, map/lot number for the legal notice. Provide a description of the land in sufficient detail to allow identification of the inland wetlands and watercourses, the area(s) (in acres or square feet) of wetlands and watercourses to be disturbed, soil type(s), and wetland vegetation.

2. APPLICANT: John Paul Abarca
Address: 15 Sunset Dr Phone: 860-391-1689
Old Lyme, CT 06371 Fax: _____
Business: Abarca Design + Build Cell: _____
15 Sunset Drive, Old Lyme, CT Email: abarca.designbuild@gmail.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.

3. OWNER: Nelly Abarca
Address: 46 Brainerd Rd Phone: 860-739-4918
Niantic, CT 06357 Fax: _____
Email: nellych12@yahoo.com Cell: _____

**As the legal owner of the property listed on this application, I hereby consent to the proposed activities. And I hereby authorize the members and agents of the Agency to inspect the subject land, at reasonable times, during the pendency of the application and for the life of the permit.

Owners Printed Name: Nelly Abarca
Owners Signature: Nelly Abarca Date: 2-19-2026

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):

John Paul Abarca

Address: 15 Sunset Dr

Phone: 860-391-1689

Old Lyme, CT 06371

Fax: _____

Email: abarca design build@gmail.com

Cell: _____

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: \$60.00 (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: John Paul Abarca Date: 2-19-26

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

Appendix D - ORDINANCE ESTABLISHING SCHEDULE OF FEES FOR CONSERVATION, PLANNING AND ZONING COMMISSIONS

- 1.1 Application Fee **
 - 1.1.1 Residential Uses..... \$150.00 Plus *\$50.00/LOT
Plus Fee from Schedule A
 - 1.1.2 Commercial Uses..... \$400.00
Plus Fee from Schedule A
 - 1.1.3 All Other Uses \$200.00
Plus Fee from Schedule A
- *Each lot with regulated activities
- **\$60 fee required by C.G.S 22a-27j will be added to the base fees.

- 1.2 Approval by Duly Authorized Agent ** \$100.00
- 1.3 Appeal of Duly Authorized Agent Decision..... \$300.00

- 1.4 Significant Activity Fee \$300.00

- 1.5 Public Hearing Fee
 - 1.5.1 Single Residential \$200.00
 - 1.5.2 Commercial/Industrial/Multi-Family \$450.00

- 1.6 Complex Application Fee Actual Cost
 The Inland Wetlands Agency may charge an additional fee sufficient to cover the cost of reviewing and acting on complex applications. Such fee may include, but not be limited to, the cost of retaining experts, to advise, analyze, review, and report on issues requiring such experts. The Agency or the duly authorized agent shall estimate the complex application fee, which shall be paid pursuant to section 19 1 of these regulations within 10 days of the applicant's receipt or notice of such estimate. Any portion of the complex application fee in excess of the actual cost shall be refunded to the applicant no later than 30 days after publication of the agency's decision.

- 1.7 Permitted and Nonregulated Uses :
 - 1.7.1 Permitted Uses as of Right \$0.00
 - 1.7.2 Nonregulated \$0.00

- 1.8 Regulation Amendment Petitions \$500.00
(Does not include Notices or Regulation Advisories from DEP)
 - 1.8.1 Map Amendment Petitions \$500.00
Plus Fee from Schedule B

- 1.9 Modification of Previous Approval: \$100.00
- 1.10 Renewal of Previous Approval \$100.00
- 1.11 Monitoring Compliance Fee \$100.00

- 1.12 SCHEDULE A. For the purpose of calculating the permit application fee, the area in schedule A is the total area of wetlands and watercourses and the upland review area upon which a regulated activity is proposed.
 SQUARE FEET of AREA
 - 1.12.1. Less than 1,000 \$0.00
 - 1.12.2. 1,000 to 5,000 \$250.00
 - 1.12.3. More than 5,000 \$750.00

- 1.13 SCHEDULE B. For the purpose of calculating the map amendment petition fee, linear feet in schedule B is the total length of wetlands and watercourses boundary subject to the proposed boundary change.
 LINEAR FEET
 - 1.13.1. Less than 500 \$0.00
 - 1.13.2 500 to 1,000 \$250.00
 - 1.13.3 More than 1,000..... \$750.00

240

340

5510

February 19, 2026

To whom it may concern,

The property owners at 46 Brainerd Rd are looking to re-subdivide 46 Brainerd Rd in the efforts to build a new single-family residence for their daughter. The new building will be a 4 bedroom, 2.5 bath residence. This property does contain a section of wooded wetlands that will not be directly disturbed to build this residence. The septic system will be located approximately 54 feet from the wetlands, and the main building would be located about 117 feet from the wetlands. The construction process would be a typical construction in terms of setting in the silt fencing first, marking the location of the proposed house and septic, then clearing a 30 ft radius of shrubs and most trees around the proposed house. Several trees will be saved for architectural purposes. A construction grade driveway will be built as shown and described in civil drawings. The marked foundation area will be excavated and moved around onsite as shown on civil plans. The existing ledge will be pinned, and a new foundation will be poured. We will backfill the soil towards the front yard as much as possible. Approximately 28 days later, we will build the house on the new foundation. A new rear deck will be built. Jobsite will be cleaned and maintained regularly.

We look forward to building a new family's home in this beautiful town.

Thank you,

John Paul Abarca
Project Architect and Builder



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.

PART I: Must Be Completed By The Inland Wetlands Agency

- DATE ACTION WAS TAKEN: year: _____ month: _____
- ACTION TAKEN (see instructions - one code only): _____
- WAS A PUBLIC HEARING HELD (check one)? yes no
- 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

- TOWN IN WHICH THE ACTIVITY IS OCCURRING (print name): Niantic
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)): _____
- LOCATION (see instructions for information): USGS quad name: _____ or number: _____
subregional drainage basin number: _____
- NAME OF APPLICANT, VIOLATOR OR PETITIONER (print name): John Paul Aberca
- NAME & ADDRESS OF ACTIVITY / PROJECT SITE (print information): 46 Branard Rd, Niantic, CT 06357
briefly describe the action/project/activity (check and print information): temporary permanent description: _____
- ACTIVITY PURPOSE CODE (see instructions - one code only): _____
- ACTIVITY TYPE CODE(S) (see instructions for codes): _____
- WETLAND / WATERCOURSE AREA ALTERED (see instructions for explanation, must provide acres or linear feet):
wetlands: _____ acres open water body: _____ acres stream: _____ linear feet
- UPLAND AREA ALTERED (must provide acres): _____ acres
- AREA OF WETLANDS / WATERCOURSES RESTORED, ENHANCED OR CREATED (must provide acres): _____ acres

DATE RECEIVED:

PART III: To Be Completed By The DEEP

DATE RETURNED TO DEEP:

FORM COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO

LIST OF ABUTTERS FOR 46 BRAINERD RD

Parcel ID	Owner Name	Owner Address	Owner City	Owner State	Owner Zip
07.4 20	ABARCA NELLY G	46 BRAINERD RD	NIANTIC	CT	06357
07.2 2	BROWN RUSSELL L & SUSAN	41 BRAINERD RD	NIANTIC	CT	06357
07.4 23	CONNECTICUT STATE OF CT	79 ELM ST 6TH FL	HARTFORD	CT	06106
07.2 35	JEFFREY BRUNO	44 BRAINERD RD	NIANTIC	CT	06357
07.4 21	THE RODERICK M CORNISH REVOCABLE TRUST	185 MAIN ST #301	NIANTIC	CT	06357



Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for this form may be used for domestic and international mail.

From: John Paul Abarca
15 Sunset Drive
Old Lyme, CT 06371

To: Roderick Cornish
The Roderick M Cornish Revocab
185 Main St #301
Niantic, CT 06357

PS Form 3817, April 2007 PSN 7530-02-000-9065

U.S. POSTAGE PAID
FCM LETTER
NIANTIC, CT
06357
FEB 25, 26
AMOUNT
\$2.40
S2324H500847-13



RDC 99



Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for this form may be used for domestic and international mail.

From: John Paul Abarca
15 Sunset Drive
Old Lyme, CT 06371

To: Jeffrey Bruno
44 Brainerd Rd
Niantic, CT 06357

PS Form 3817, April 2007 PSN 7530-02-000-9065

U.S. POSTAGE PAID
FCM LETTER
NIANTIC, CT 06357



tail



Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for this form may be used for domestic and international mail.

From: John Paul Abarca
15 Sunset Drive
Old Lyme, CT 06371

To: State of CT
79 Elm St 6th Fl
Hartford, CT 06106

PS Form 3817, April 2007 PSN 7530-02-000-9065

U.S. POSTAGE PAID
FCM LETTER
NIANTIC, CT
06357
FEB 25, 26
AMOUNT
\$2.40



Certificate of Mailing

This Certificate of Mailing provides evidence that mail has been presented to USPS® for this form may be used for domestic and international mail.

From: John Paul Abarca
15 sunset drive
Old Lyme, CT 06371

To: Russell + Susan Brown
41 Brainerd Rd
Niantic, CT 06357

PS Form 3817, April 2007 PSN 7530-02-000-9065

U.S. POSTAGE PAID
FCM LETTER
NIANTIC, CT

