



Yes  No      This project requires a State General Stormwater Quality Permit  
 Registration # \_\_\_\_\_  
 Yes  No      This project requires a permit from the Army Corps of Engineers  
 Yes  No      This project requires a Water Diversion Permit  
 Yes  No      This project requires a Dam Permit  
 Yes  No      This property is subject to a Conservation Restriction and/or a  
 Preservation Restriction. If yes, attach a copy of certified notice  
 Drainage calculations submitted:  
 Date \_\_\_\_\_ Rev. date \_\_\_\_\_ Rev. date \_\_\_\_\_

Yes  No      This project requires a State Traffic Commission Permit  
 Yes  No      This project requires a DOT Encroachment Permit  
 Yes  No      The plan has been submitted to the DOT District 2 Office

Number of parking spaces provided \_\_\_\_\_  
 Number of vehicle trips per day generated by this project \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
 Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY**

Review	Date Sent	Date Received
Town Engineer		
Uncas Health District		
Fire Marshal		
Building Official		
Mayor		
WPCA		
DOT District 2		
N.L. Water		
Other		

Date of Receipt \_\_\_\_\_ Date of Public Hearing \_\_\_\_\_ Hearing Closed \_\_\_\_\_  
 Date of Extension #1 \_\_\_\_\_ Date of Extension # 2 \_\_\_\_\_ Terminal Date \_\_\_\_\_