

**APPLICANT INSTRUCTIONS:** All applicants must complete this application form. The Commission will notify the applicant of any additional information that may be required and will schedule a Public Hearing if necessary. In addition to the information required, the applicant may submit other supporting facts or documents which may assist the Commission in its evaluation of this proposal. **PLEASE SUBMIT FOURTEEN (14) COPIES OF THE APPLICATION AND FOURTEEN (14) COPIES OF ANY OTHER DOCUMENTS AT LEAST FIVE BUSINESS DAYS PRIOR TO THE MEETING.**

### **I. Applicant Information**

Name Michael Desautels  
Address 237 Chesterfield Road Montville, CT  
Tel # 860.912.8303 Cell # \_\_\_\_\_  
Fax # \_\_\_\_\_ Email desautels\_mike@yahoo.com

Interest in Property ☐ Owner ☐ Option Holder ☒ Developer ☐ Harvester ☐ Other  
☐ **Attach a Written Consent to the proposed activity from the owner if applicant is not the owner** ☐ Required ☐ Not Required

### **II. Owner Information**

Name Zachary Cash Address 257 Chesterfield Road Montville CT  
Tel # 860.235.1813 Cell # \_\_\_\_\_  
Fax # \_\_\_\_\_ Email zachcash22@gmail.com

### **III. Engineer Information**

Contact Brian D. Florek, LS CFS  
Firm Florek Surveying LLC Address 239 Shore Road Waterford, CT 06385  
Tel # 860.271.6006 Cell # \_\_\_\_\_  
Fax # \_\_\_\_\_ Email bflorek@floreksurveyingllc.com

### **IV. Attorney Information**

Contact \_\_\_\_\_  
Firm \_\_\_\_\_ Address \_\_\_\_\_  
Tel # \_\_\_\_\_ Cell # \_\_\_\_\_  
Fax # \_\_\_\_\_ Email \_\_\_\_\_

### **V. Property Information**

Address of Proposed Activity 257 Chesterfield Road  
Assessor's Map and Lot Number 29 / 66  
Land Records /Deed Volume: 649 Page: 942 Acreage of Property ±60  
Zoning R-80

**Provide a List of the Names and Mailing Addresses of Adjacent Property Owners (Attach Sheet)**

## VI. Wetlands and Watercourse Information

Total Acreage of Wetlands on the site 10.50 Acres (Eastern Half Only) acres

Wetland Disturbance Area <sup>0</sup> \_\_\_\_\_ sq ft

Upland Review Disturbance Area <sup>0</sup> \_\_\_\_\_ sq ft

Have the Wetlands Been Flagged ☒ Yes ☐ No Year 2022 & 2025

Name of Soil Scientist James Cowen, CPSS

Linear Feet of Watercourse Disturbance <sup>0</sup> \_\_\_\_\_ ft

Creation of New Wetlands <sup>0</sup> \_\_\_\_\_ sq ft

## VII. Project Description

☒ Subdivision ☒ Review No Regulated Activity ☐ Permit Modification  
☐ Regulated Activity ☐ Permitted Use as of Right ☐ Permit Renewal

### Activity will involve (Check all that apply)

☐ Alteration ☒ Construction ☐ Pollution ☐ Stormwater Discharge  
☐ Deposition of Material \_\_\_\_\_ cubic yards  
☐ Removal of Material \_\_\_\_\_ cubic yards

**See attached checklist of items that are to be included on Plan and supplemental data.**

A) Attach a Detailed Plan of the Proposal and indicate Plan Title and Date.

Desautels Resubdivision Sheets 1-13; Dated: May 7, 2025

B) Provide Brief Description of the Proposed Project on separate piece of paper. Instructions attached.

C) List Titles and dates of all documentation which will be included and submitted with this application and attach to application. Documents should include, but are not limited to; Project Proposal, Soil Scientist Reports, and Drainage Calculations.

## VIII. Other Information

1. Does the application involve an activity in a regulated area that is within 500 ft of another municipality?

☐ Yes ☒ No

- If YES, then a copy of the application and all material is to be submitted to said Town and a copy of the transmittal form is to be provided to the Commission.

2. Is the property located within a Flood Hazard Area? ☐ Yes ☒ No

-If YES, then please provide additional material showing the location of the area.

3. Is the regulated activity within a Public Water Supply Aquifer or Watershed? ☐ Yes ☒ No

- If YES, then a copy of the application and all material is to be submitted to the State Department of Health as well as the appropriate Water Company. See attached instructions for the Notification Process for the State Health Department. A copy of the transmittal forms shall be provided to the Commission.

4. Does the application require approval from Uncas Health District? ☐ Yes ☒ No  
- If YES, then a copy of the approval is to be provided to the Commission.

5. Does the application require approval from the Public Works Dept? ☐ Yes ☒ No  
- If YES, then a copy of the approval is to be provided to the Commission.

6. Does the application require approval from the Town of Montville WPCA? ☐ Yes ☒ No  
- If YES, then a copy of the approval is to be provided to the Commission.

7. Does the application require permits from the following agencies?

			Submission Info
Army Corps of Engineers	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Date _____
Department of Environmental Protection	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Date _____
Department of Transportation	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Date _____

- If YES, then a copy of the application and all material is to be submitted to said Agency and a copy of the transmittal form is to be provided to the Commission.

8. Does this permit require a State Water Diversion Permit? ☐ Yes ☒ No

9. Does this permit require a State Dam Permit? ☐ Yes ☒ No

10. Is this property subject to a Conservation Restriction and/or a Preservation Restriction?

-If YES, attach a copy of certified notice. ☐ Yes ☒ No

11. If the application is a renewal or modification of an existing permit, is a copy of the original approval included in the documentation package? ☐ Yes ☒ No

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The undersigned applicant hereby consents to necessary and proper inspections of the above mentioned property by agents of the Montville Inland Wetlands Commission at reasonable times, both before and after the permit in question has been granted by the Commission.

Name Mik Dorato

Date \_\_\_\_\_

Property Owner if other than Applicant

[Signature]

Date 5/11/25

Inland Wetlands Application

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