

2/5/24

Facsimile (860) 658-9467

Town of Simsbury

933 HOPMEADOW STREET

SIMSBURY, CONNECTICUT 06070

8:30 - 7:00 Monday

8:30 - 1:00 Friday

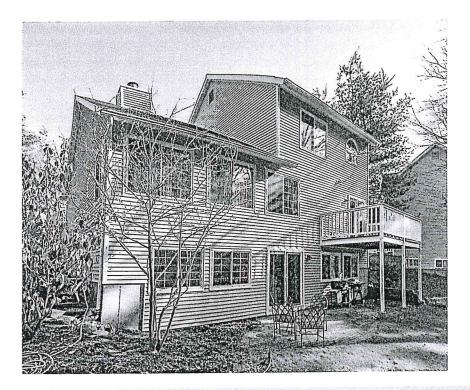
1666 8:30 - 4:30 Tuesday through Thursday, 00

Application for Authorized Wetland Agent Approval Regulated Activities Permitted Under Section 12 of the Inland Wetlands and Watercourses Regulations (Please review publishing requirements on next page)

| DATE: 3/5/24 | FEE: \$ 190 | CK #: | APP | #: |
|--|---|---|--------------------------------|--------------------------|
| PROPERTY ADDRESS: 12 | EDGEWOOD C | | | |
| NAME OF APPLICANT: | MES KAHNWE | TLAL | | |
| MAILING ADDRESS: 12 E | DEENVOOD CT. | SIMSBURY | CT 060 | 70 |
| EMAIL ADDRESS: | | | , | 3-979-1507 |
| NAME OF OWNER: Same | - | | | |
| MAILING ADDRESS: | | | | |
| EMAIL ADDRESS: | | | TELEPHONE # | |
| | egulations, such as: a) remove or g) otherwise adversely at PROMOFF PRO FONSOS | e material from; b) de ffect a regulated are | posit material in or dis a: | scharge to; c) construct |
| CERTIFICATIONS AND PERM As owner, I hereby give permission to Agents, or Town Staff to enter upon ongoing work, subject to twenty-fou | to the Town of Simsbury's Cons my land to make observations a | and tests as may be nee | | |
| I hereby certify that all statements he shall be contingent upon field concerning the permit by the | litions and activities being sul | ostantiated as indicat | | 7.00 - |
| certify that I have the authority to some | sign this application. 3/5/24 Date | Signature and Title | of Applicant | Date |
| Signature of Wetlands Agent | Name of Wetlands Agent | Date | | |
| Telephone (860) 658–3200 | An Eaual Om | portunitu Emplouer | | 8:30 _ 7:00 / Monday |

An Equal Opportunity Employer

www.simsbury-ct.gov 03-05-2024

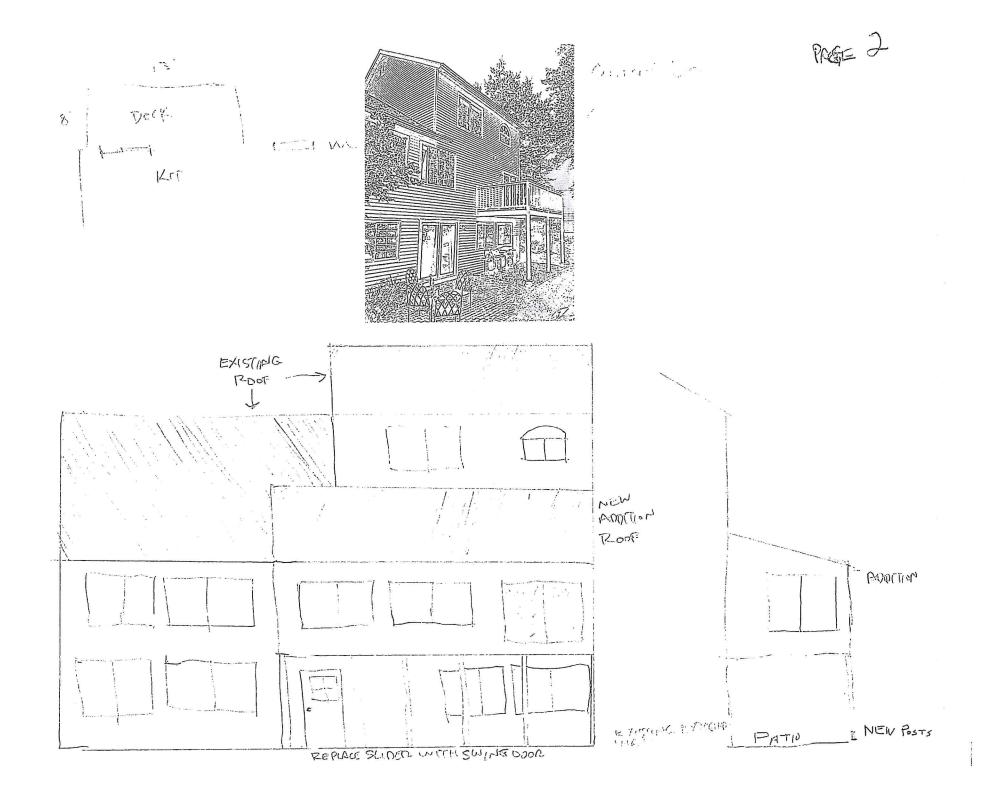






12 Edgewood Ct Simsbury CT

Existing Rear Elevations



203-979-1507

