

## Connecticut Standardized Municipal Instructions for Solar Photovoltaic (PV) Permitting Process

*Town of Pomfret*

### Accessing Application Materials

The Building Permit Application and [CT Solar PV Permit Supplement](#), [Zoning Permit Application](#), [Wetlands Application](#), and [B100 Letter](#) can be accessed in this document or online at <http://www.pomfretct.gov/building-office>.

Hard copies are also available at Pomfret Town Hall.

Building Department, Pomfret Town Hall  
5 Haven Road, Pomfret Center, CT 06259

Phone 860.974.2972 Fax 860.974.3950

Hours: Wednesdays 4pm – 6pm

Building Official: Joseph Pajak

Email [buildingofficial@pomfretct.gov](mailto:buildingofficial@pomfretct.gov)

Website <http://www.pomfretct.gov/building-office>

### Application Materials Checklist

Below is a checklist of materials needed for roof, ground, and pole-mounted applications to be considered complete. Please note that applications with missing attachments will be delayed.

#### Roof Mounted:

- ☐ **POMFRET BUILDING PERMIT APPLICATION**
- ☐ **CT SOLAR PV PERMIT SUPPLEMENT**
  - ☐ One-line electrical diagram/plan
  - ☐ One-line site plan
  - ☐ Structural Evaluation by a Professional Engineer
  - ☐ Solar PV Module specification sheets
  - ☐ Inverter specification sheets
  - ☐ Copy of E-1's electrical license, insurance, workman's compensation
- ☐ Application fee (\$10.26 / \$1,000)
- ☐ **FEE SCHEDULE**

#### Ground and Pole Mounted:

The following is required **IN ADDITION** and **PRIOR** to the requirements for Roof Mounted Solar PV.

- ☐ **B-100 LETTER** from the Northeast District Department of Health and \$45 fee
- ☐ Wetlands Approval: if the installation is within 150 feet of a wetland, Inland Wetlands and Watercourses Commission Approval may be required. For approval submit a **WETLANDS APPLICATION** and \$160.00 fee during regularly scheduled meeting (1<sup>st</sup> Wed. of each month at 7pm)
- ☐ For Zoning Department Approval, submit a **ZONING APPLICATION**, one-line site plan and \$110 fee  
[\\*Additional information on Zoning Application](#)

### Submitting Municipal Permit Applications

Applications must be signed and include payment to be considered complete. Applications will not be processed until the Application Fee is received. Completed Zoning, Building, and Supplement Applications can be submitted via mail or in person to the Pomfret Town Hall at any time. Completed applications will be received and reviewed during each office's Wednesday office hours (see below). Approved Building and Zoning permits can be mailed or picked up from Town Hall Mondays 8:30am-12:30pm or Wednesdays 1pm-6pm.

### Process of Approval

The below steps indicate the departments in the order they require approval and the typical processing time. Each department must be contacted separately for approval.

<u>Town Department</u>	<u>Typical Processing Time*</u>	<u>Ground/Pole Mounted</u>	<u>Roof Mounted</u>
<input type="checkbox"/> Northeast District Health Dep't	7-10 Days	X	
<input type="checkbox"/> Wetlands Commission (if applicable)	30 Days	X	
<input type="checkbox"/> Zoning	7-10 Days	X	
<input type="checkbox"/> Building	7-10 Days	X	X

Note: Building Department's office hours are every Wednesday 4:00pm-6:00pm; Planning/Zoning office hours every Wednesday 1pm-6pm; The Wetlands Commission reviews applications at meetings- 1<sup>st</sup> Wed. of each month at 7pm

Typically, the applicant will be notified of Building Permit approval via phone or email within 5 business days

### Inspection Requirements

Once all permits to construct the solar installation have been issued and the system has been installed, it must be inspected. One on-site inspection is required for roof mounted systems and up to two inspections are required for ground and pole mounted systems. Inspections can be scheduled by calling the Pomfret Building Department or the Building Official directly at 860-234-1053. Inspection appointments are provided as needed at flexible appointment times.

Once the system has passed inspection the Building Department will notify Eversource within 1 business day.

**TOWN OF POMFRET  
APPLICATION FOR BUILDING PERMIT**

PERMIT NO. \_\_\_\_\_

OFFICE HOURS: Wednesday 4:00 p.m. - 6:00 p.m.  
PHONE: 860-974-2972 Office & Answering Machine FAX: 860-974-3950

Assessor's Map # \_\_\_\_\_ Block \_\_\_\_\_ Lot# \_\_\_\_\_

**A PERMIT MUST BE OBTAINED AND FEE PAID BEFORE BEGINNING WORK!  
SEPARATE PERMITS ARE REQUIRED FOR PLUMBING - HEATING -  
ELECTRICAL**

Est. Value \$ \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

APPLICATION MUST BE TYPED OR PRINTED

Applicant \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Building Lot No. \_\_\_\_\_ House No. \_\_\_\_\_ Road \_\_\_\_\_

Owner \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Builder \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Architect \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Type of Building \_\_\_\_\_ Size of Building \_\_\_\_\_

Area 1st floor \_\_\_\_\_ 2nd floor \_\_\_\_\_ Total \_\_\_\_\_

Description/Remarks \_\_\_\_\_

Type of Work: Original ☐ Alteration ☐ Addition ☐ Repair ☐ Demolition ☐

Type of Heat: Hot Water ☐ Hot Air ☐ Steam ☐ Electric ☐ Wood ☐

Swimming Pool Above Ground ☐ In Ground ☐ Fence ☐ State Approved ☐

Approvals Acquired: Septic ☐ Wetlands ☐ Driveway ☐ Fire Marshal ☐ Planning ☐ Zoning ☐

The undersigned hereby applies for permit to do work according to the following specifications, same to be in all respects in accordance with the laws and building regulations of the State of Connecticut, Basic Building Codes, Land Use regulations and ordinances of the Town of Pomfret, Connecticut. A final inspection is required before the building can be occupied or a Certificate of Use or Occupancy is issued.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Building Official Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS PERMIT EXPIRES SIX (6) MONTHS FROM DATE OF ISSUE**

Type	Foundations	Roof Type	Floor Const.	Tiling	Spec.	Size	Span
Single Fam.	Stone	Gable	Wood Joist	Bath Fl. & Wscl.	Joist		
Two Fam.	Concrete	Hip	Concrete	Bath Fl. & Walls	2nd Fl.		
Apt. House	Conc. Blocks	Gambrel		Bath Fl. only	Rafter		
Stores	Piers	Truss	Flooring	Toilet - Rooms	Girder		
Modular	Thickness	Flat	1 2 3	Ceramic	Column		
Office		Roof Pitch	Hardwood	Other	Sill		
Factory	Construction		Res. Tile		Post		
Gas Sta.	Frame	Roofing	Rugs	Footing	Plate		
Com. Gar.	Brick	Asph. Sh.	Plywood	Size	Stud		
Private Gar. Att.	Conc. Blocks	Wood Sh.		Stone			
Base Gar.	Veneer	Built-up		Conc.			
Farm Building		Comp. Roll.	Interior	Drains	Inspection		
	Exterior		1 2 3	Key-way	Footing		
No. of Rooms	Clpbd. or Wd. Shin.	Cellar	Plas.	Chimneys	Foundation		
No. of Bathrooms	Plain Bds or Nov. 8-DG	Whole	Gyp. Bd.	Size of Flues	Rough Framing		
Insulation	Vinyl	Part	Ins. Bd.	Stone	Rough Electrical		
R-30 Ceiling	Alum.	None	Wood	Brick	Rough Plumbing		
R-19 Walls	Conc. Blocks	Conc. Floor	Layout	Block	Heating		
	Br. Com. <input type="checkbox"/> Face <input type="checkbox"/>	Dirt Floor	Cond.	Factory Built	Insulation		
	Log			Steel	Chimneys		
				Fireplace	Final		

☐ Structure Will Be In Designated Flood Hazard Areas

Base Flood Elevation: \_\_\_\_\_

Building Official: \_\_\_\_\_ Date: \_\_\_\_\_

Permit # [For Jurisdiction Use]: \_\_\_\_\_

## CT Standardized Solar PV Permit Application Supplement

Please fill in the following information and submit ALL applicable attachments.

Date: \_\_\_\_\_

General Description of Solar PV Array: \_\_\_\_\_

System Size (kW DC): \_\_\_\_\_

### Solar PV Mounting Information

Mounting Type (roof, pole, ground, other-specify): \_\_\_\_\_

Mounting System Manufacturer: \_\_\_\_\_

Product Name and Model #: \_\_\_\_\_

### Building Information (For Roof-Mounted Systems Only)

Building Type (e.g. house, shed, barn, slab): \_\_\_\_\_

Building Height (in feet): \_\_\_\_\_

Is the building permitted? ☐ Yes ☐ No ☐ NA

If no, reason: \_\_\_\_\_

### Electrical Description

Size (amps) and type (phase, voltage) of electrical service: \_\_\_\_\_

Amperage of main breaker: \_\_\_\_\_ Will the value of main breaker change? ☐ Yes ☐ No To: \_\_\_\_\_

Rated amperage of the bus bar in the main panel: \_\_\_\_\_

Type of interconnection (e.g. breaker-load side, supply-side interconnect): \_\_\_\_\_

Electrical panel location: \_\_\_\_\_

If load side interconnect, will solar intertie into a subpanel? ☐ Yes ☐ No

If yes, rated amperage of the subpanel bus bar? \_\_\_\_\_ Value of breaker protecting subpanel bus bar? \_\_\_\_\_

**Attachments for application** (See instructions on the next page. Example Attachments are available for download at [www.energizect.com/sunrisene](http://www.energizect.com/sunrisene))

- ☐ 1. Additional Subcontractors and Information
- ☐ 2. One-Line Electrical Drawing
- ☐ 3. One-Line Site Plan Drawing
- ☐ 4. Attachment Details (Line Drawing)\*
- ☐ 5. Solar PV Module Specification Sheets From Manufacturer
- ☐ 6. Inverter Specification Sheets From Manufacturer
- ☐ 7. Pole or Ground Mount Information (if applicable)\*
- ☐ 8. Structural Evaluation (if required by municipality). See page 3 for documentation requirements.
- ☐ 9. Additional Information for Large Solar PV Systems (as Specified by the Municipality)

**\*NOTE:** Applicants should submit either Attachment 4 for roof-mounted systems OR Attachment 7 for pole/ground-mounted systems, not both.

## Instructions for ATTACHMENTS to the Connecticut Standardized Solar PV Permit Application

Please Complete the Application Form (page 1) and provide all applicable Attachments based on the below instructions for Attachments 1-8. Attachment 8 is a Structural Evaluation to be completed if required by the municipality. Additional information required by a municipality for large solar PV systems can be submitted as a 9<sup>th</sup> Attachment. Example Attachments (e.g. sample drawings) can be found at [www.energizect.com/sunrisene](http://www.energizect.com/sunrisene).

### Each Attachment—Subcontractor List and

#### **Drawings —Must Include:**

- Date
- Property Owner
  - Name
  - Address
  - Contact phone number
- Installation Company
  - Name of company and contact person
  - Address
  - Contact phone number
- Drawing number and Revision number or other control method
- Drawing designer

### **Attachment 1. Additional Subcontractor List**

(If Needed, as per Permit Application)

### **Attachment 2. One-Line Electrical Drawing Must Show:**

- Size of electrical service
  - Size of Main Breaker
  - Size of Bus Bar (If Known)
- Type of electrical service
- If interconnection point is a subpanel
  - Size of Subpanel Main Breaker
  - Size of Subpanel Bus Bar (If Known)
- Nominal power of solar system (Watts)
  - DC Capacity: Nameplate “STC” Value of all panels, watts
  - AC Capacity: Total AC capacity of Inverters, watts
- Batteries (If Present): Type, Quantity, Nominal Voltage, Capacity kWh
  - H<sub>2</sub> mitigation methods (If Necessary)

### **(Attachment 2 continued)**

- Interconnection method
  - Size of overcurrent protection
- Number, type and electrical configuration of solar panels
- Number and type of Inverters
- Values for source stickers: NEC 690.53; NEC 690.54 (Encouraged, Not Required)
- Wiring methods
  - Wire Type(s), Size
  - Conduit Type(s), Size
- Solar metering (If Appropriate)
- Electrical current contribution from all PV sources
- Electrical grounding details: Wire Type, Size, GEC

### **Attachment 3. One-Line Site Plan Drawing Must Show:**

- Location of solar panels
- Location of Inverters and major equipment
- Location of roof obstructions (Vents, Chimneys, etc.)
- Location of Main Breaker Panel
- Location of Utility Meter
- Location of AC disconnect
- Location of batteries and/or charge controllers (If Appropriate)
- Location of solar metering (If Appropriate)
- Planned conduit path (Encouraged, Not Required)
- Gross dimensions of structure (If Appropriate)
- Approximate layout of building or other structure (If Appropriate)
- Property lines, zoning, and setback considerations (If Appropriate)
- Trenching details: Location, Depth and Length of Trench (If Appropriate)
- A notation indicating scale —or not to scale (Both are Acceptable)

## Instructions for ATTACHMENTS to the Connecticut Standardized Solar PV Permit Application

### Attachment 4. Attachment Details for Roof-Mounted Systems (Line Drawing) Must Show:\*

- Racking System
  - Manufacturer of racking structure
  - Model
  - Type
- Flashing description
- Fastener detail
  - Type of fasteners, e.g. Lag Screws, Seam Clamps, Ballast
    - If Lag Screws include:
      - (1) Type (e.g. Zinc, Stainless steel)
      - (2) Size of Lag
      - (3) Depth of Thread Penetration
      - (4) Type of Sealant (e.g. caulk)
- Mitigation of Dissimilar Metals
  - Describe how any dissimilar metals will be isolated

### Attachment 5. Solar PV Module Specification Sheets (provide PDF from manufacturer)

### Attachment 6. Inverter Specification Sheets (provide PDF from manufacturer)

### Attachment 7. Pole Mount or Ground Mount Information (if applicable):\*

- Racking system
- Mounting specification sheets and details from manufacturer (PDFs)
- Manufacturer's Pre-Engineered Document or PE Stamp
- Code Compliance Manual (If Requested by Municipality)
- One-way distance from the Solar PV system to the interconnection point
- Electrical grounding details
- Height of solar PV system at maximum design tilt
- Applicable zoning information if not shown on site plan (e.g. setback from property line)

\***NOTE:** Applicants should submit either Attachment 4 for roof-mounted systems OR Attachment 7 for pole/ground-mounted systems, not both.

### Attachment 8. Structural Evaluation (if required by the municipality)

- **NOTE:** If this Attachment is required by the municipality it must be submitted in a format accepted by the municipality (see two examples, listed below). Installers should contact the municipality's Building Department to determine what documentation will meet the municipality's Structural Evaluation requirements.

#### Two potentially acceptable formats are:

1. Structural Review Worksheet (available at [www.energizect.com/sunrisene](http://www.energizect.com/sunrisene)). This worksheet can be used by an installer to meet the Structural Evaluation requirements of a municipal Building Department if the department specifically authorizes its use for that purpose.

#### OR

2. Proof of a Structural Review performed by a Registered Design Professional (e.g. Professional Engineer).

### Attachment 9. Additional information required for larger solar PV systems

- This Standardized Solar PV Permit Application Supplement can also be used to permit larger systems. If a municipality requires additional information to permit larger systems, they should specify the information needed as a 9<sup>th</sup> attachment to the application.

TOWN OF POMFRET  
BUILDING INSPECTION DEPARTMENT  
FIVE HAVEN ROAD  
POMFRET CENTER, CT 06259  
PHONE: 974-2972

TOWN OF POMFRET BUILDING INSPECTION FEE SCHEDULE

<u>Type of Construction</u>	<u>Average Building Cost</u>
Commercial.....	\$95.00 per sq. foot
Residential.....	\$80.00 per sq. foot
Garage Attached.....	\$30.00 per sq. foot
Porch.....	\$20.00 per sq. foot
Enclosed Porch.....	\$30.00 per sq. foot
Sheds/Barns.....	\$30.00 per sq. foot

<u>Type of Inspection(s)</u>	<u>Minimum Fees</u>
Fireplace.....	\$35.00 per opening
Chimney.....	\$35.00 per chimney
Roofing.....	\$25.00 or \$10.26 per thousand
Electrical.....	\$25.00 or \$10.26 per thousand
Plumbing/Mechanical.....	\$25.00 or \$10.26 per thousand

The permit fee is \$10.26\* per thousand of the average building cost. There is a \$10.26 minimum building permit fee. (\*Town Fee of \$10.00 per thousand and State Fee of 26 cents (.26) per thousand)

Calculation Example:	Average Bldg. Cost	30.00 per sq. foot
For A Shed	Sq. Footage of Shed=	<u>x 150 sq. ft.</u>
	Total Cost to Build =	\$4,500
	Divide by 1000	<u>/ 1,000</u>
	Per Thousand Cost=	4.5
	Building Fees	<u>x 10.26</u> per thousand
	Total Permit Fee =	\$ 46.17

**Amended: Special Town Meeting, April 5, 2005.**  
**Effective Date: April 30, 2005.**  
**State Fee Revision: July 1, 2010**

# B100a / Change in Use Application INSTRUCTIONS

This form is used to conform to the State of Connecticut Public Health Code, Section 19-13-B100a, which governs building conversions and/or changes in use to existing structures, building additions, garages/accessory structures, swimming pools and sewage disposal area preservation.

You are filling out this form to provide the local health department with important information to assure that you:

- Do not build any structures on top of an existing septic system
- Conform to the required separating distances and maintain your property according to the Connecticut Public Health Code

## In addition to filling out this form, you will also have to submit the following with your application:

- ☐ If your home was built prior to 1985, please have your **deed or the previous owners name** available. This information can be obtained from your Town Clerk.
- ☐ A **plot plan** drawn to scale (Example: 1 inch = 20 feet) which shows the location of the house, well, sewer line, and closest property lines. Be sure to indicate distances between each item.
- ☐ A **written description** of the proposed addition, accessory structure or pool.
- ☐ If proposing an addition to an existing structure, please provide a **sketch** of the **existing** floor plan **and** a **sketch** of the **proposed floor plan** change.

### Exemptions

You **are not** required to file a B100a Application for the following:

- Accessory buildings or small sheds which will sit directly on pressure treated plywood or concrete blocks and do not require the pouring of a concrete slab, frost protected footings, sonar tubes or any other foundation that would disturb the soil.
- Anchoring kits that prevent uplift due to winds which are used for temporary structures like removable carports. Anchors should not penetrate the septic system. (Please note, anchoring kits that require the pouring of a concrete slab or permanent footings **do** require a B100a application.)

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In the event of application withdrawal by the applicant, NDDH reserves the right to retain a non-refundable processing fee.

In order to avoid unnecessary delays, please be sure to complete the form in its entirety and submit all required information and fees. Do not fax, return by mail.

For additional assistance, please contact us:



## Northeast District Department of Health

69 South Main Street, Unit 4

Brooklyn, CT 06234

Phone: 860-774-7350 / Fax: 860-774-1308 / [www.nddh.org](http://www.nddh.org)



## Northeast District Department of Health

69 South Main Street, Unit 4

Brooklyn, CT 06234

Phone - 860-774-7350 / Fax - 860-774-1308

[www.nddh.org](http://www.nddh.org)

Office Hours: Monday - Friday 7:00 am – 4:00 pm

### B100a /Change in Use Application

To conform to PHC 19-13-B100a – Building Conversions/Changes in Use, Building Additions, Garages/Accessory Structures, Swimming Pools, Sewage Disposal Area Preservation  
(See Reverse Side for Instructions.)

Street #: \_\_\_\_\_ Street: \_\_\_\_\_ Town: \_\_\_\_\_

Assessor's Map: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_ Dev. Lot : \_\_\_\_\_ Lot Size: \_\_\_\_\_

Legal Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Year Built: \_\_\_\_\_ No. of Bedrooms: \_\_\_\_\_

Description of proposed change/addition: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Signature of Legal Property Owner:

(If working on behalf of owner, please attach signed Letter of Consent)

**Date:**

\_\_\_\_\_  
**PROPERTY OWNER:** By signing above, you certify that the information provided is a true and accurate description of the addition, accessory structure, or pool.

No services will be rendered until payment is received. Do not fax, return by mail. In the event of application withdrawal by the applicant, NDDH reserves the right to retain a non-refundable processing fee.

#### NDDH Use Only

File #: \_\_\_\_\_ B100a/Change in Use Fee: \_\_\_\_\_

Name ID #: \_\_\_\_\_ Receipt # \_\_\_\_\_ Check # \_\_\_\_\_ Date: \_\_\_\_\_





## **Town of Pomfret Wetlands Application Package**

- **Inland Wetlands Permit Application form (Part 1 and 2)**
- **Wetlands Fee instructions**
- **Advisory Site Review/Agent No-fee Ruling Request form**
- **[Northeast District Department of Health \(B100a\)](#)**
- **DEP Reporting Form**

**Application forms are available at the Town Hall.**

**The Commissions Clerk hours are:**

**Monday 8:30 am – 12:30 pm and Wednesday 1:00 pm – 6:00 pm**

**OR in the Town Clerk's office:**

**Monday, Tuesday, and Thursday 8:30 am – 5:00 pm and  
Wednesday 8:30 am – 6:00 pm.**

**The Commissions Clerk can be reached at (860) 974-9135 or e-mail at  
[lynn.krajewski@pomfretct.gov](mailto:lynn.krajewski@pomfretct.gov).**

**Visit our website at [www.pomfretct.gov](http://www.pomfretct.gov)**

**TOWN OF POMFRET  
INLAND WETLAND & WATERCOURSES COMMISSION APPLICATION (IWWC)**

**PART ONE**

**PERMIT #:** \_\_\_\_\_

Date Pomfret Planning and Zoning Commission Report Submitted: \_\_\_\_\_

Non-refundable fee paid \_\_\_\_\_

Date Building Permit Checklist endorsed by Agency or authorized

Check #: \_\_\_\_\_

Agent: \_\_\_\_\_

Bond Deposited Yes No

DATE APPLICATION RECEIVED BY THE COMMISSION: \_\_\_\_\_

Deposits Paid Yes No

To be filled in by applicant at the Assessor's Office to be sure the number and street are correct.

Location \_\_\_\_\_ Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_  
Subdivision name \_\_\_\_\_ Subdivision Lot # \_\_\_\_\_ Acres \_\_\_\_\_ Dimensions sq ft \_\_\_\_\_

Applicant fill out below this line. Please print

1. Name of applicant \_\_\_\_\_ Phone \_\_\_\_\_  
Business Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Business Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

2. Name of property owner \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

3. **A non-refundable application fee and/or fees must accompany this application. Make check payable to Town of Pomfret. Permits are not transferable.** Applicant understands this application is complete only when all information, documents, maps, etc. required by the Commission have been submitted within the time determined by the Commission. **The omission of Fees and Deposits not paid or failure to submit all required documents or information requested by the commission are grounds for application denial.**

4. **Applicants interest in property to include a description of ALL proposed activities/alterations:**  
(attach extra sheets if needed)

Intended use of property Residential; Commercial; Village District; Other \_\_\_\_\_

5. Are there wetlands/watercourses located on the property: Yes No Uncertain  
a. Approximate wetland/watercourse area to be disturbed and/or affected. Acreage \_\_\_\_\_ or Dimensions \_\_\_\_\_ sq ft  
b. Distance from the edge of construction to nearest wetland/watercourse (at any location): \_\_\_\_\_ feet.

6. **A complete site plan showing the proposed activity; erosion and sedimentation plans; any drainage plans; septic fields; driveways and/or impervious surfaces or a Commission approved subdivision site plan depicting any wetlands or watercourses that may be impacted as a result of the proposed activity.**

7. Describe plan alternatives considered to avoid or reduce adverse environmental impact on wetlands and/or watercourses and subsequently rejected and why the alternative as set forth in the application was chosen; **all such alternatives shall be shown to scale on a site plan.**

OVER

8. Describe on the site plan the proposed activity and any existing and/or proposed conditions in relation to wetlands and watercourses, and any further activities related to the regulated activity which are made inevitable by the proposed activity and which may have an impact on wetlands and/or watercourses.
9. **Other information requested by the Commission:**  
 Is the proposed activity located within 500 feet of an adjoining town line: Yes, No  
 Will the proposed activity disturb an area to exceed 5000 sq ft of a wetland or watercourse. Yes, No  
 Does the activity require submission of a DEP Natural Diversity Data Base Form? Yes, No, Uncertain  
 If yes, please attach a copy of the DEP project review for this application.
10. If the Commission determines a public hearing is required, Section 9.3 of the IWWC regulations shall apply. See Part 2 Significant Activity.

The undersigned warrants the truth of all statements contained herein and in all submitted supporting documents, according to the best of his/her knowledge and belief and authorizes the Commission members and alternate members or any of its staff, as defined under Section 2 of the IWWC regulations, to inspect the subject land, at reasonable times, with or without the Applicant or his/her representative present before, during and until a final decision on the application's completion has been issued by the Chairman or an authorized commission member. The undersigned agree that Section 13 – Security, if required as a condition of permit approval, and Section 19 – Application Fees and Deposits, of the Pomfret IWWC regulations shall apply to the final approval and issuance of a wetlands permit.

Signature of Applicant/or  
authorized agent \_\_\_\_\_

\_\_\_\_\_  
Print name

Signature of owner(s) \_\_\_\_\_

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Print name

**Note to Applicant.** Any activity in a wetlands or watercourse of more than 5000 sq. ft. requires the review and approval from the US Army Corp of Engineers in Concord MA. 1-800-343-4789 in addition to this permit before any work begins. Approval of this application is subject to the applicant obtaining all other permits required by Sections 11.9c and 18.1 inclusive of the Pomfret IWWC regulations, and **no** work pursuant to the wetlands permit may begin until **all other approval(s) are obtained.** The Agency or its appointed agent will issue a project Cease and Desist Order for non-compliance.

Department of Health letter of approval: Date \_\_\_\_\_ initials \_\_\_\_\_

Site Plan approved: Date \_\_\_\_\_ Initials \_\_\_\_\_

Final inspection: Date \_\_\_\_\_ Initials \_\_\_\_\_

Application Withdrawn: Date \_\_\_\_\_

Application Denied without prejudice: Date \_\_\_\_\_

Approved Date: \_\_\_\_\_ Approved with conditions: Date \_\_\_\_\_ See attached permit.

**TOWN OF POMFRET**  
**INLAND WETLAND & WATERCOURSES COMMISSION APPLICATION (IWWC)**  
**PART TWO     SIGNIFICANT IMPACT ACTIVITY**

Date of Receipt \_\_\_\_\_

If the proposed activity involves a significant impact activity as determined by the Agency, additional information, based on the nature and anticipated effects of the activity, including but **not limited** to the following, is required.  
(See Section 7.6 of the IWWC regulations)

1. ☐ **Site Plan** (three copies) Showing the entire lot with existing and proposed conditions, wetland and watercourse boundaries, by soil type, land contours, boundaries of land ownership, proposed alterations and uses of wetlands and watercourses and **other pertinent features** of the land and the proposed activity to include buildable sites and E & S Control measures, prepared by a Connecticut State Licensed Engineer, land surveyor, architect or landscape architect or landscape architect, soil scientist or wildlife biologist, or by such other **qualified** persons as recognized by the commission.
2. ☐ **Engineer reports and analyses** and additional drawings to **fully describe** the proposed activity including any filling, excavation, drainage or hydraulic modifications to wetlands and/or watercourses and upland areas that may impact on wetlands/watercourses on/off site.
3. ☐ **Mapping of all soil types** consistent with the categories established by the Soil Survey of Windham County Connecticut of the U.S. Natural Resources Conservation Service. The wetlands and upland soils by type shall be delineated **in the field** by a certified soil scientist and the soil scientist's comprehensive field delineation shall be depicted in the site plan.
4. ☐ Describe the ecological communities and their function in relationship to wetlands and/or watercourses involved and the effects of the proposed activity on these communities as determined by a **professionally recognized Wetland Scientist or Wildlife Biologist satisfactory to the Agency**.
5. ☐ Describe how the applicant will **change, diminish, or enhance** the ecological communities and functions of the wetlands or watercourses involved in the application and **each alternative considered, and a description of why each alternative considered was deemed neither feasible nor prudent as determined by a certified wildlife biologist**.
6. ☐ Analysis of **chemical or physical** characteristics of any fill material; and **management practices** and other measures designed to **mitigate** the impact of the proposed activity on wetlands and/or watercourses.
7. ☐ Attach a plan describing **Best Management Practices** and other measures designed to **eliminate or reduce adverse impact** on wetlands and/or watercourses of the proposed activity.
8. ☐ Three (3) copies of all application materials shall be submitted to comprise a complete application to include fees assessed and deposits required. An incomplete application shall be grounds for denial of the application under Section 8.8 of the IWWC Regulations.

Signature of Applicant or  
Authorized Agent \_\_\_\_\_

\_\_\_\_\_  
Print Name

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ e-mail \_\_\_\_\_

Signature of Owner (s) \_\_\_\_\_

\_\_\_\_\_  
Print Name

# APPENDIX A

## POMFRET FEES FOR MUNICIPAL LAND USE APPLICATIONS

### (Inland Wetlands and Watercourses Commission)

**Purpose:** This document is to inform the public of the fee process that allows the Town of Pomfret to recoup the cost and expense of processing land use applications by The Pomfret Inland Wetlands and Watercourses Commission, also known as the Agency.

#### **Definitions:**

1. **Municipal Consultant** - Any professional hired by the Town or Agency (Wetlands Commission) to assist in the review and evaluation of a land use application.
2. **Municipal Official** – Any person appointed to a decision making position in the Town of Pomfret.
3. **Processing** – Any and all activities and functions performed by municipal officials and staff, as well as by professional consultants retained by municipal officials and staff in connection with the receipt, handling, review, assessment, analysis, and noticing of land use applications. Such functions and activities include, without limitation, all aspects of reviewing and analyzing the application and all materials submitted, whether by the applicant or others, in connection with the application, as well as reviewing, inspecting and or monitoring activities by staff that are required to ensure compliance with the terms and conditions of any wetlands permit approval.
4. **Staff** – Municipal employees, consultants (e.g., planning, legal, engineering, environmental, etc.), as well as employees of any regional agency of which the Town is a member.

#### **General:**

1. Set forth herein is an explanation of how wetlands application land use fees and estimated expense deposits are determined and what penalties may be assessed should the applicant fail to meet the fee and deposit requirement.
2. The applicant must pay the base fee and State filing fee (minimum application fee) at the time he or she submits the application to the Agency's clerk during the Agency's scheduled business hours. The wetlands Agency shall determine the amount of any additional funds (fees and/or deposit) needed for application processing. The Agency shall consider potential costs that may include but, which are not limited to, Staff site plan review, site monitoring and inspection(s), wetlands remediation, legal consultation, cease and desist orders, etc., after receipt of the application. It is not the responsibility of the Agency clerk to determine or to advise the applicant of the application fees or deposits to be paid, except for the minimum fee that must accompany all applications.
3. In accordance with Town policy, an applicant may request one (1) pre-application conference with municipal staff or consultants not to exceed ½ hour. The applicant will be billed for any time exceeding the ½ hour as part of the application process.

### **Computation of fees and deposits:**

1. The fee schedule is determined by multiplying the hourly rate of staff and municipal consultant's times the average total hours historically expended on applications and other costs to the Town such as postage, advertising decisions in local newspapers, site walks, application review, etc. In most cases the base fee will cover these processing costs. However, there may be exceptions should the Agency determine that additional information concerning the application is needed. The Agency may also determine that in addition to fees, a deposit to cover estimated application processing expenses is required. These costs may include, but are not limited to application review by consultants, environmental impact studies, site monitoring to insure compliance with conditions of application approval, site inspections by the Town Engineer, a cease and desist order and/or notice of violation if circumstances warrant, site mitigation if required, etc.
2. Deposits shall be computed as the total of all fees due except for the minimum fee (Base fee plus State filing fee) multiplied by 150%. The total amount to be paid by the applicant is the sum of all fees and the required deposit minus any credits that apply.

**Fee Schedule:** See Schedule A attached.

### **Submission of fees and deposits:**

1. The minimum application fee shall be paid by the applicants at the time the application is submitted.
2. All other required fees as listed in the fee schedule and any anticipated processing deposit expenses required for new, pending or an approved application shall be paid before a wetlands permit is approved or issued.
3. The Agency's clerk will notify the applicant via certified mail of the required deposit to include any outstanding fees or other expenses within seven (7) days of The Agency's decision. The applicant must submit the required deposit or payment of all amounts due to the Agency within fifteen (15) days from the date the notice was mailed.
4. If the applicant fails to deposit the required amount when due, the Agency shall consider the pending application at its next scheduled meeting as incomplete and reject or deny the application under Section 8.8 and Section 19.5d of its Regulations.
5. If the expenses (costs of processing) exceed the amount of the initial application deposit for any reason, the Agency shall inform the applicant via certified mail to submit the additional amount to be paid. **The Agency shall take no further action on the pending application until the amount assessed by the Agency is paid.** Failure by the applicant to forward the additional funds required will result in the Agency denying the application for cause or revoking the application if previously approved.
6. No permit will be issued until all fees and other costs associated with application processing are paid, appeals notwithstanding.
7. The minimum application fees and all other fees denoted on Schedule A denoted by \* that may apply are not refundable. Fees and or deposits required for application review by Staff, independent studies and/or evaluations, legal and or other expert opinion and which shall include post permit approval construction and engineering and compliance inspections, etc., not obligated, shall be returned to the applicant.

### **Appeals:**

An applicant may challenge in writing on a form to be provided by the Town clerk any billing within thirty (30) days of the date billed. The Agency shall hear the appeal within sixty-five (65) days and make its ruling within an additional sixty-five (65) days. This provision shall not bar the Agency from denying an application for cause.

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## SCHEDULE A

1. Base Fee for all applications*	\$100.00
2. State filing fee for all applications*	\$ 60.00
3. Regulated Activities (Not As Of Right)*	
a. Subdivisions and re-subdivisions	\$ 100.00 /lot
b. Single-family residential uses	(no additional fee)
c. All other uses	\$ 220.00
d. Significant impact to any wetland or watercourse	\$ 250.00
4. Permitted and Non-regulated Uses*	
a. Uses Permitted As Of Right	\$ 50.00
b. Non-regulated uses	\$ 20.00
5. Public Hearing*	\$ 150.00
6. Modification of Prior Permit*	\$ 25.00
7. Amendment to official wetlands and watercourses map*	\$ 250.00
8. Engineering review	\$ 500.00
9. Town Planner review	\$ 400.00
10. Legal review pertaining to deeds, easements, bonding or Other matters*	\$ 500.00
11. Stenographic and transcription services if required. The estimated cost to be determined by the Agency.	

**Note to applicant:**

1. All fees are subject to change without notice. Fees marked with star (\*) are not refundable. Processing costs less than the amounts shown above for other expenses shall be refunded to the applicant.
  2. The Base fee and the State filing fee are the minimum fees all applicants must submit with the application. No action may be taken by the Agency or it's duly appointed Agent until the minimum fee has been paid. No application may be granted or approved by the Agency until all applicable fees have been paid.
  3. There is no provision for the Agency to grant a fee waiver to applicant.
-

## Advisory Site Review/Agent No-Fee Ruling Request Form

**To be completed by property owner/or authorized representative**

Describe all proposed activities and/or land alterations involved in your request. Include a sketch or map of the property and any other documentation that would make clear the project proposed.

Are there wetlands or watercourses located on the property?      Yes      No      Uncertain  
Distance from project to nearest wetland/watercourse: \_\_\_\_feet (include state highway/town  
road drainage ditches, etc.)

The undersigned warrants the truth of all statements made herein and of all submitted supporting documents, according to the best of his or her knowledge and belief and authorizes the Commission's appointed agent(s) or member(s) of the Commission to inspect the property.

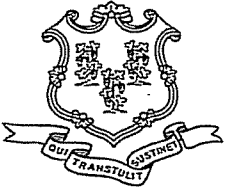
**Appointed Agent's Comments (and by separate written report)**

The undersigned appointed agent **certifies** that the conditions set forth in section 6, of the Commission's regulations and section 22a-41, inclusive of the Connecticut General Statutes have been **fully** met in considering this application and accordingly, his and/or her decision made on this application without exception.

### Commission Action

Form revised 5/26/05





STATE OF CONNECTICUT  
DEPARTMENT OF ENVIRONMENTAL PROTECTION



STATEWIDE INLAND WETLANDS & WATERCOURSES  
ACTIVITY REPORTING FORM

Pursuant to section 22a-39(m) of the General Statutes of Connecticut and section 22a-39-14 of the Regulations of Connecticut State Agencies, inland wetlands agencies must complete the Statewide Inland Wetlands & Watercourses Activity Reporting Form for each action taken by such agency.

This form may be made part of a municipality's inland wetlands application package. If the municipality chooses to do this, it is recommended that a copy of the Town and Quadrangle Index of Connecticut and a copy of the municipality's subregional drainage basin map be included in the package as well.

Please remember, the inland wetlands agency is responsible for ensuring that the information provided is accurate and that it reflects the final action of the agency. Incomplete or incomprehensible forms will be mailed back to the agency. Instructions for completing the form are located on the following page.

The inland wetlands agency shall mail completed forms for actions taken during a calendar month no later than the 15<sup>th</sup> day of the following month to the Department of Environmental Protection (DEP). Do not mail this cover page or the instruction page. **Please detach and mail only the completed green reporting form to:**

Wetlands Management Section  
Inland Water Resources Division  
Department of Environmental Protection  
79 Elm Street  
Hartford, CT 06106

Questions may be directed to the DEP's Wetlands Management Section at (860) 424-3019.

# **INSTRUCTIONS FOR COMPLETING THE STATEWIDE INLAND WETLANDS & WATERCOURSES ACTIVITY REPORTING FORM**

Use a separate form to report each action taken by the Agency. Complete the form as described below.

## **PART I: To Be Completed By The Inland Wetlands Agency**

1. Enter the year and month the Inland Wetlands Agency took the action being reported.
2. Enter ONE code letter to describe the final action or decision taken by the Inland Wetlands Agency. Do not submit a reporting form for withdrawn applications. Do not enter multiple code letters (for example: if an enforcement notice was given and subsequent permit issued - two forms for the two separate actions are to be completed).  
  
A = Permit Granted by the Inland Wetlands Agency  
B = Permit Denied by the Inland Wetlands Agency  
C = Permit Extended or Amended by the Inland Wetlands Agency  
D = Map Amendment to the Official Town Wetlands Map or an Approved Amendment to a Project Site Map  
E = Enforcement Notice of Violation, Order, or Court Injunction and/or Court Fines by the Inland Wetlands Agency  
F = Jurisdictional Ruling by the Inland Wetlands Agency (i.e.: activities "permitted as of right" or activities considered non-regulated)  
G = Agent Approval pursuant to CGS 22a-42a(c)(2)  
H = Appeal of Agent Approval Pursuant to 22a-42a(c)(2)
3. Check "Yes" if a public hearing was held in regards to the action taken; otherwise check "No".
4. Enter the name of the Inland Wetlands Agency official verifying that the information provided on this form is accurate and that it reflects the FINAL action of the agency.

**PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant** - If Part II is completed by the applicant, the applicant must return the form to the Inland Wetlands Agency. The Inland Wetlands Agency must ensure that the information provided is accurate and that it reflects the FINAL action of the Agency.

5. Enter the name of the municipality for which the Inland Wetlands Agency has jurisdiction and in which the action/project/activity is occurring.  
  
Check "Yes" if the action/project/activity crosses municipal boundaries and enter the name(s) of the other municipality(ies) where indicated. Check "No" if it does not cross municipal boundaries.
6. Enter the USGS Quad Map name and number (1 through 115) which contains the location of the action/project/activity. The USGS Quad Map name and number can be found on the Connecticut Town and Quadrangle Index Map (the directory to all USGS Quad Maps), or it may be indicated in the lower right-hand corner of each USGS Quad Map. A Connecticut Town and Quadrangle Index Map has been mailed to all Municipal Inland Wetlands Agencies. USGS Quad Maps are available at town hall or by contacting the DEP Maps and Publication Sales at (860) 424-3555.  
  
ALSO enter the four-digit identification number of the corresponding Subregional Drainage Basin in which the action/project/activity is located. If the action/project/activity is located in more than one subregional drainage basin, enter the number of the basin in which the majority of the action/project/activity is located. A town subregional drainage basin map has been mailed to all Municipal Inland Wetlands Agencies. Subregional drainage basin maps are also available by contacting the DEP Inland Water Resources Division at (860) 424-3019, and may be available via the Nonpoint Education for Municipal Officials web site: [nemo.uconn.edu/action/maps.htm](http://nemo.uconn.edu/action/maps.htm)
7. Enter the name of the individual applying for, petitioning, or receiving the action.
8. Enter the name and address or location of the action/project/activity site. Also provide a brief description of the action/project/activity.

9. **CAREFULLY REVIEW** the list below and enter ONE code letter which best characterizes the action/project/activity. All state agency projects must code "N".

A = Residential Improvement by Homeowner	I = Storm Water / Flood Control
B = New Residential Development for Single Family Units	J = Erosion / Sedimentation Control
C = New Residential Development for Multi-Family / Condos	K = Recreation / Boating / Navigation
D = Commercial / Industrial Uses	L = Routine Maintenance
E = Municipal Project	M = Map Amendment
F = Utility Company Project	N = State Agency Project
G = Agriculture, Forestry or Conservation	P = Other
H = Wetland Restoration, Enhancement, Creation	

10. Enter between one and four codes to best characterize the project or activity being reported. Enter "NA" if this form is being completed for the action of map amendment. You must provide code 12 if the activity is located in an established upland review area (buffer, setback). You must provide code 14 if the activity is located BEYOND the established upland review area (buffer, setback) or NO established upland review area (buffer, setback) exists.

1 = Filling	8 = Underground Utilities (no other activities)
2 = Excavation	9 = Roadway / Driveway Construction
3 = Land Clearing / Grubbing (no other activity)	10 = Drainage Improvements
4 = Stream Channelization	11 = Pond, Lake Dredging / Dam Construction
5 = Stream Stabilization (includes lakeshore stabilization)	12 = Activity in an Established Upland Review Area
6 = Stream Clearance (removal of debris only)	14 = Activity in Upland
7 = Culverting (not for roadways)	

**Examples:** Jurisdictional ruling allowing construction of a parking lot in an upland where the municipality *does not* have an established upland review area must use code 14, other possible codes are 2 and 10. Permitted construction of a free standing garage (residential improvement by homeowner) partially in an established upland review area with the remainder in the upland must use code 12 and 14, other possible codes are 1 and 2. Permitted dredging of a pond must use code 11, other possible codes are 12 and 5.

11. Enter in acres the area of wetland soils or watercourses altered. Include areas that are permanently altered, or proposed to be permanently altered, for all agency permits, denials, amendments, and enforcement actions. For those activities that involve filling or dredging of lakes, ponds or similar open water bodies enter the acres filled or dredged under "open water body". For those activities that involve directly altering a linear reach of a brook, stream, river or similar linear watercourse, enter the total linear feet altered under "stream". Remember that these figures represent only the acreage altered not the total acreage of wetlands or watercourses on the site. You MUST provide all information in ACRES (or linear feet as indicated) including those areas less than one acre. To convert from square feet to acres, divide square feet by the number 43,560. Enter zero if there is no alteration.
12. Enter in acres the area of upland altered as a result of an ACTIVITY REGULATED BY the inland wetlands agency, or as a result of an AGENT APPROVAL pursuant to 22a-42a(c)(2). Include areas that are permanently altered, or proposed to be permanently altered, for all agency permits, denials, amendments, and enforcement actions. Inland wetlands agencies may have established an upland review area (also known as a buffer or setback) in which activities are regulated. Agencies may also regulate activities beyond these established areas. You MUST provide all information in ACRES including those areas less than one acre. To convert from square feet to acres, divide square feet by the number 43,560. Enter zero if there is no alteration. Remember that these figures represent only the upland acreage altered as a result of an activity regulated by the inland wetlands agency, or as a result of an agent approval.
13. Enter the acres that are, or are proposed to be, restored, enhanced or created for all agency permits, denials, amendments, and enforcement actions. Restored or enhanced applies to previously existing wetlands or watercourses. Created applies to a NON-wetland or NON-watercourse area which is converted into wetlands or watercourses (therefore question #10 must provide 12 and/or 14 as an answer, and question #12 must also be answered). You MUST provide all information in ACRES including those areas less than one acre. To convert from square feet to acres, divide square feet by the number 43,560. Enter zero if there is no restoration, enhancement or creation.

**PART III: To Be Completed By The DEP** - Please leave this area blank. Incomplete or incomprehensible forms will be mailed back to the inland wetlands agency.



CONNECTICUT DEPARTMENT OF  
ENVIRONMENTAL PROTECTION  
79 Elm Street  
Hartford, CT 06106-5127

Gina McCarthy, Commissioner

GIS CODE #: \_\_\_\_\_  
For DEP Use Only

## Statewide Inland Wetlands & Watercourses Activity Reporting Form

Please complete this form in accordance with the instructions. Please print or type.

### PART I: To Be Completed By The Inland Wetlands Agency Only

1. DATE ACTION WAS TAKEN: Year \_\_\_\_\_ Month \_\_\_\_\_
2. ACTION TAKEN: \_\_\_\_\_
3. WAS A PUBLIC HEARING HELD? Yes \_\_\_\_\_ No \_\_\_\_\_
4. NAME OF AGENCY OFFICIAL VERIFYING AND COMPLETING THIS FORM:  
(print) \_\_\_\_\_ (signature) \_\_\_\_\_

### PART II: To Be Completed By The Inland Wetlands Agency Or The Applicant

5. TOWN IN WHICH THE ACTION IS OCCURRING: \_\_\_\_\_  
Does this project cross municipal boundaries? Yes \_\_\_\_\_ No \_\_\_\_\_  
If Yes, list the other town(s) in which the action is occurring: \_\_\_\_\_
6. LOCATION: USGS Quad Map Name: \_\_\_\_\_ AND Quad Number: \_\_\_\_\_  
Subregional Drainage Basin Number: \_\_\_\_\_
7. NAME OF APPLICANT, VIOLATOR OR PETITIONER: \_\_\_\_\_
8. NAME & ADDRESS/LOCATION OF PROJECT SITE: \_\_\_\_\_  
Briefly describe the action/project/activity: \_\_\_\_\_
9. ACTIVITY PURPOSE CODE: \_\_\_\_\_
10. ACTIVITY TYPE CODE(S): \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
11. WETLAND / WATERCOURSE AREA ALTERED [must be provided in acres or linear feet as indicated]:  
Wetlands: \_\_\_\_\_ acres      Open Water Body: \_\_\_\_\_ acres      Stream: \_\_\_\_\_ linear feet
12. UPLAND AREA ALTERED [must be provided in acres as indicated]: \_\_\_\_\_ acres
13. AREA OF WETLANDS AND / OR WATERCOURSES RESTORED, ENHANCED OR CREATED: \_\_\_\_\_ acres  
[must be provided in acres as indicated]

DATE RECEIVED:

### PART III: To Be Completed By The DEP

DATE RETURNED TO DEP:

FORM COMPLETED: YES NO

FORM CORRECTED / COMPLETED: YES NO



Town of Pomfret  
Planning & Zoning Commission  
5 Haven Road  
Pomfret Center, CT 06259

## Pomfret Zoning Permits

In order to obtain an approved zoning permit with the Town, you will need to complete the following steps:

1. Contact the Northeast District Department of Health. They are located at 69 South Main Street, Unit 4, Brooklyn, CT 06234. Phone 860-774-7350. They will issue a **B-100 LETTER** which covers changes in use, or in the case of new single-family home construction, an approval to construct a septic system.
2. It is advised that you check with the Inland Wetlands and Watercourses Commission before applying for your zoning permit to see if it is necessary for you to go through their application process first.
3. Complete Pomfret Zoning Permit Application. This can be picked up at the Town Hall or downloaded from the web page – [www.pomfretct.gov](http://www.pomfretct.gov). Include a sketch of property showing where your house is located, indicating where your project is going. (Proposed location of addition, garage, pool, etc.) Mark the approximate distance to your property lines. In the case of single-family home construction, you will need to submit an A-2 survey prepared by a professional surveyor instead of a sketch.
4. The application can be dropped off at the Town Hall at any time. Include with the application the B-100 letter or the approval to construct from the Department of Health and the permit fee of \$110.00 – checks made out to the Town of Pomfret. The Planning Office is open every Wednesday from 1:00 – 6:00 PM; phone 860-974-9135. The Zoning Enforcement Officer is in the office each Wednesday from 4:30 – 6:00 PM. He will pick up any applications that have come in, visit the site during the course of the week, and typically have the signed application back in the office on the following Wednesday. You should have the location of the project staked or marked before he comes out to visit the site. Approximate wait time for signed permit is one week.
5. You can pick up your signed permit at the Town Hall during the Land Use Clerk's office hours. The Land Use Clerk is in the office on Mondays from 8:30 AM – 12:30 PM and on Wednesdays from 1:00 – 6:00 PM. Call the office before you come in to make sure the permit is on site. You can then take the signed permit to the Building Inspector in order to obtain your Building Permit. The Building Inspector has office hours at the Town Hall each Wednesday from 4:00 – 6:00 PM; phone 860-974-2972. There is generally no wait for the issuance of the Building Permit.

**POMFRET ZONING ENFORCEMENT OFFICER  
PLANNING & ZONING COMMISSION**

Application for Zoning Permit  
(For building and/or uses listed in Section 4 and 4.2)

No. \_\_\_\_\_

Date: \_\_\_\_\_

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***To be completed by Applicant***

Application is hereby made for a Zoning Permit for the use described herein and shown in the accompanying plans.

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Property Owner/Trustee: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Engineer/Surveyor/Architect/Builder: \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Location of Property: \_\_\_\_\_ Land Records Book: Volume \_\_\_\_\_ Page \_\_\_\_\_

Land Records Map: Map \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Lot Size in Sq. Ft. \_\_\_\_\_ Total Building Floor Area in Sq. Ft. \_\_\_\_\_

Existing Use of Land or Building \_\_\_\_\_ Zone \_\_\_\_\_

Proposed Use of Land or Building \_\_\_\_\_

(Applicants for permitted single-family/two-family dwellings and accessory buildings or expansions or additions of such buildings on residential lots shall complete **the plot plan on the reverse side of this form**. All other are required to submit a site plan per Section 5. The ZEO reserves the right to require additional information necessary to evaluate the application for a Zoning Permit)

Signature of Applicant/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner/Trustee: \_\_\_\_\_ Date: \_\_\_\_\_

*(If different than Applicant)*

- Notes:
1. To be accepted by the Planning Department, the entire application must be filled completed, signed and submitted with the required fee(s) and map(s) prepared in accordance with the applicable regulations.
  2. The submittal of this application constitutes the property owner's permission of the Commission or its staff to enter the property for the purpose of inspection.
  3. A permit issued on the basis of this application certifies conformance with the Pomfret Zoning Regulations. Other permits may be required, such as those concerning driveways, wetlands, water and sewer facilities, fire protection, building code and health code. Obtaining the additional permits is the responsibility of the applicant.

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***To be filled in by the Zoning Enforcement Officer/Planning & Zoning Commission***

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Date \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_

Reason for Disapproval: \_\_\_\_\_

Signature: \_\_\_\_\_ Zoning Enforcement Officer/Planning & Zoning Chairman