



Town of Greenwich
 Inland Wetlands & Watercourses Agency
 Town Hall, 101 Field Point Road, Greenwich, CT 06830
 Phone 203 622-7736 Fax 203 622-7764

GREENWICH INLAND WETLANDS & WATERCOURSES AGENCY QUESTIONNAIRE
[This form is NOT an IWWA Application]

PROJECT: Street Address _____ GW CC RIV OG

TAX ACCT.# - Has there ever been an IWWA application for this site? YES NO Appl. # -

WORK SITE: Driveway or access strip is on the N S E W side of: _____ (street),
 approximately _____ feet N S E W from the intersection of _____ (streets)

ACTIVITY: (Circle ONE) Addition Demolition Deck Garage Interior renovations New residence Pool Tennis court
 Other (please specify) _____ **NOTE: A separate form is required for each activity. Only a demolition does NOT require a plot plan.**

Will this activity require an addition to the septic system? YES NO

Owner's full name [please print] _____ Phone (____)-_____

Mailing address _____ Town _____ Zip _____

Authorized Agent's name [please print] _____ Phone (____)-_____

Mailing address _____ Town _____ Zip _____

YOU MUST INCLUDE A PLOT PLAN, SHOWING THE PROPOSED ACTIVITY IN RED, WITH THIS QUESTIONNAIRE.
If you do not, staff review of your proposal will be delayed or prevented. An incomplete questionnaire can prolong the process.

IWWA staff will review this questionnaire to determine if regulated activities may occur as a result of your proposal, necessitating an IWWA permit.

If your project *does not require* an IWWA permit, we will sign off on this questionnaire, which you will need if you are obtaining permits from other departments.

If an IWWA permit *is required*, we will supply you with a permit application packet. You must obtain a permit prior to the commencement of your project. **No work may begin until you receive an IWWA permit.** The issuance of a building permit alone does not constitute an authorization to proceed. The Agency may impose penalties on any person who commits or assists in any violation of the IWWA Regulations.

If you do not receive notice regarding your questionnaire within two weeks of submission, please contact the IWWA office.

As the *property owner* or, *authorized agent* [check one] I believe that the information I have submitted is correct.

Signature _____ **Date** ____/____/____

Please **return** this completed form to the
Greenwich Inland Wetlands & Watercourses Agency
 and wait for its review before applying for a building permit

Received
 Date Stamp

STAFF NOTES

Office Rev Date ____/____/____ Permit Required? YES NO W/Wet? _____ Tidal Staff _____

Field Inv Date ____/____/____ Permit Required? YES NO W/Wet? _____ Tidal Staff _____

Soils Report Date ____/____/____ Author _____ Soils _____

Comments: _____