

TOWN OF SALISBURY INLAND/WETLAND & CONSERVATION COMMISSION
REQUEST TO THE INLAND WETLANDS AND WATERCOURSE COMMISSION OR AGENT FOR:

(Circle one) PERMIT TRANSFER – PERMIT EXTENSION – DECLARATORY RULING

1. Applicant(s) Name: GREG MURPHY
Mailing Address: 157 Lime Rock Rd Lakeville, CT 06039
Phone: 914 414 6066 Email Address: murphy.gregoryr@gmail.com
Applicant(s) interest in land (owner, lessee, option holder, etc.) OWNER

**If applicant is not the owner, then the owner's consent, duly acknowledged, to the proposed activity, must be attached

2. Owner(s) Name: (If same as applicant, so state) _____
Mailing Address: _____
Phone: _____ Email Address: _____

DECLARATORY RULING – If you believe your activity falls under Section 4 of the Inland Wetlands and Watercourse Regulations you must ask the Commission for a Jurisdictional ruling to declare your activity as an "As of right use" or "Non-regulated Use".

- Cite the provision (such as 4.1a, 4.2.b, etc.) 4.1a
- Location of Proposed Activity: 157 Lime Rock Rd
- Purpose and description of the proposed activity:
Looking to clean around my .39 of an acre ^{Pond}. This would include creating a clear access around the edges of the pond

(Include additional pages if needed) For horses to drink from safely. Some maintenance would include facilitating the inflow ^{div} outflow that already exist.

TRANSFER OF PERMIT

Transfer permit _____ From _____ to _____
(Name of Permit Holder) (New Owner/Applicant)

Reason: _____

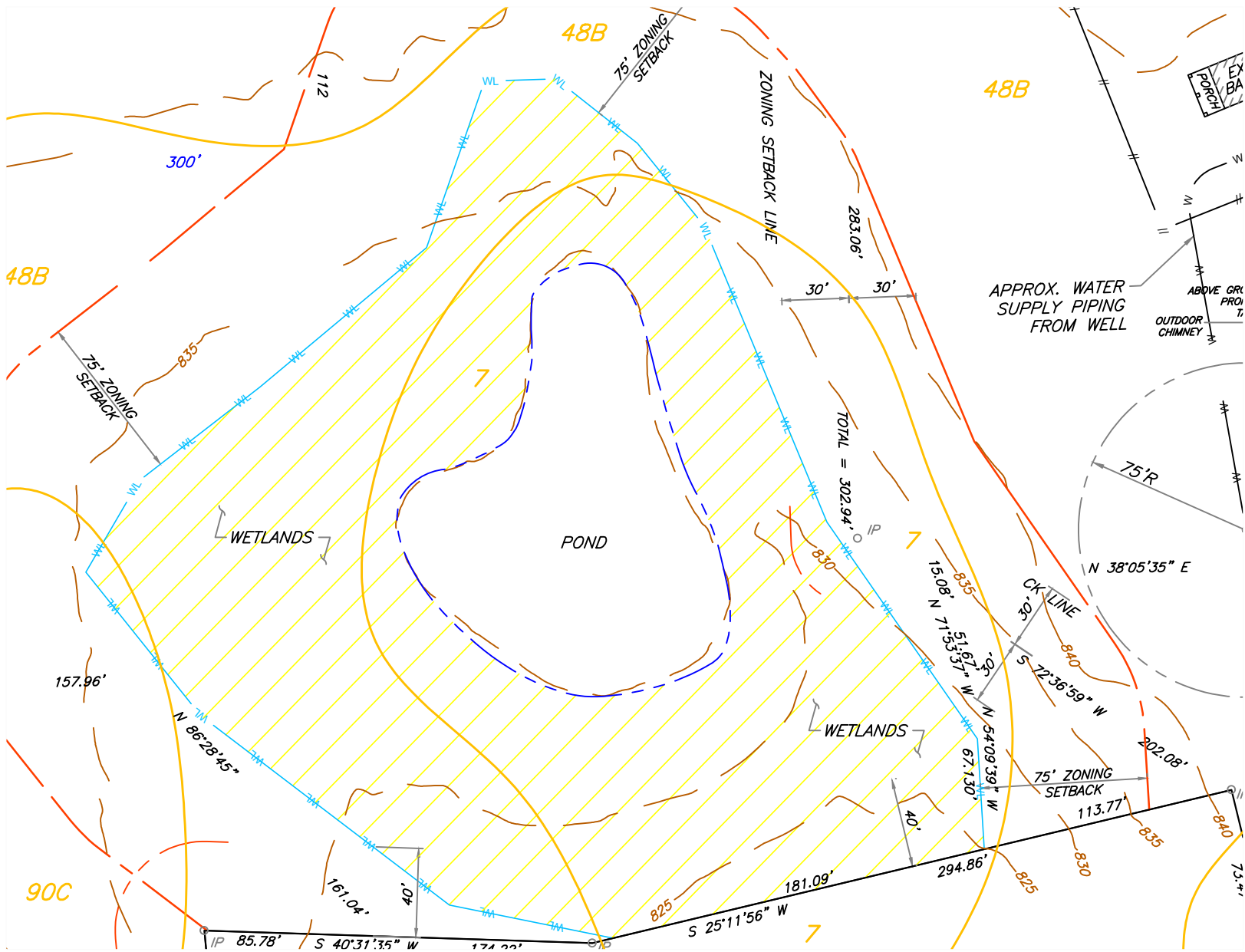
EXTENSION OF PERMIT

I request permit _____ for _____ to be extended for and additional _____ Years. (Regulated Activity- Incl. extra sheets if needed)

Location of approved activity _____

Reason _____

<u>Cory R. Murphy</u>	<u>Gregory R Murphy</u>	<u>4/18/22</u>
Applicant's Signature	Print or type name	Date
<u>Cory R. Murphy</u>	_____	_____
Owner's Signature	Print or type name	Date





Material





















