

**APPLICATION FOR CHANGE OF  
INLAND WETLANDS REGULATIONS OR BOUNDARY  
INLAND WETLANDS AND WATERCOURSES COMMISSION  
Sprague, Connecticut**

APPLICANT:

\_\_\_\_\_

ADDRESS OF APPLICANT:

\_\_\_\_\_

PHONE NUMBER:

\_\_\_\_\_

(To be completed by the Commission)

Application No.: \_\_\_\_\_

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

Fee Paid: \_\_\_\_\_

APPLICATION FOR (Check appropriate box):

\_\_\_\_\_ Change of Inland Wetlands Regulations  
(Attach description of change desired, noting affected section of Regulations.)

\_\_\_\_\_ Change of Official Inland Wetlands and Watercourses Map  
(Attach map showing present designation and proposed change.)

\*\*\*\*\*

**(To be completed by the Commission)**

Date of Public Hearing: \_\_\_\_\_

Date of Commission Action: \_\_\_\_\_

Action: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Signature of Chairman or Secretary of Commission**

Application fee----- Please see attached fee schedule