

Inland Wetlands Agency Information: (** Identifies required field)

Notification of Change to Municipal Inland Wetlands Agency Contact Information

Please complete and submit this form whenever there is a change in a town's Inland Wetlands Agency contact information. Information submitted on this form will be available to the public on the DEEP website unless otherwise noted in the comments section of the form.

Municipality **			
Agency Name ** (as shown on town regulations)			
Street Number/Name and/or PO Box			
Town/City			
State		Zip	
Phone			
Authorized Wetlands Agent Information: (** Identifies required field)			
Agent Name **			
Agent Title			
Street Number/Name and/or PO Box			
Town/City			
State		Zip	
Work Telephone **			
Alternative Telephone			
Work Hours			
E-mail ** (If you do not have an email address, please enter 'Not Available')			
Comments			

Submit this completed form by email to Primitiva.Rivera@ct.gov

1 Rev. 1/30/18