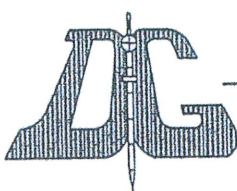


EX#10



DIETER & GARDNER, INC.

LAND SURVEYING • PLANNING • CIVIL ENGINEERING

RECEIVED

SEP 16 2025

Land Use Department

sent 8/23

In accordance with the Town of Ledyard's Zoning Regulations, we are providing notice of an application being filed for site plan approval for 750 (a.k.a. 748) Colonel Ledyard Highway, Ledyard, Ct.

Peter C. Gardner
Dieter & Gardner, Inc.

U.S. Postal ServiceTM CERTIFIED MAIL[®] RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com.

Hartford, CT 06134

Certified Mail Fee	\$5.30
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$0.00
☐ Return Receipt (electronic)	\$0.00
☐ Certified Mail Restricted Delivery	\$0.00
☐ Adult Signature Required	\$0.00
☐ Adult Signature Restricted Delivery	\$0.00

Postage \$0.78

Total Postage and Fees \$10.48

Sent To Commissioner of Public Health
Street and Apt. No., or PO Box No.
410 Capital Ave

City, State, ZIP+4[®]
Hartford CT 06134

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for

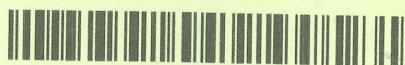


SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Commissioner of Public Health
410 CAPITAL AVE
HARTFORD CT
06134



9590 9402 9381 5002 9888 47

2. Article Number (Transfer from service label)

9589 0710 5270 1431 0599 09

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X C Roberts

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail[®]
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express[®]
- ☐ Registered MailTM
- ☐ Registered Mail Restricted Delivery
- ☐ Signature ConfirmationTM
- ☐ Signature Confirmation Restricted Delivery

fail
fail Restricted Delivery
0)

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt