



A.	General Inform	nation		
1.	Project Location (Not	e: electronic filers will cli	ck on button for GIS	locator):
	- Charled day			
	a. Street Address	¥	b. City/Town	c. Zip Code
	Latitude and Longitud	le, if Known:	d. Latitude	e. Longitude
8	f. Assessors Map/Plat Nun	nber .	g. Parcel /Lot Nu	mber
2.	Applicant:		S2	
	a. First Name	b. Last Name	c. Company	
¥	d. Mailing Address			
	e. City/Town	100	f. State	g. Zip Code
	h. Phone Number	i. Fax Number	j. Email address	etc.
3.	Property owner (if dif	ferent from applicant):	☐ Check if	more than one owner
	a. First Name	b. Last Name	c. Company	-
	d. Mailing Address			
	- O't-/T	*		
\$.	e. City/Town	8	f. State	g. Zip Code
	h. Phone Number	i. Fax Number	j. Email address	s - 1 - 2
4.	Representative (if ar	ny):	8 1	
	a. Firm			*
	b. Contact Person First N	ame	c. Contact Person La	ast Name
	d. Mailing Address			200
	e. City/Town		f. State	g. Zip Code
	h. Phone Number	i. Fax Number	j. Email address	9
ee ^{5.}	Total WPA Fee Paid	d (from Appendix A, Wetl	and Fee Transmittal	Form):
	a. Total Fee Paid	b. State	Fee Paid	c. City/Town Fee Paid
6.	General Project Des	scription:		* * *
	1. 2. 3. 4. aw	1. Project Location (Not a. Street Address Latitude and Longitude f. Assessors Map/Plat Num 2. Applicant: a. First Name d. Mailing Address e. City/Town h. Phone Number 3. Property owner (if diffication a. First Name d. Mailing Address e. City/Town Sh. Phone Number 4. Representative (if arman a. Firm a. Firm b. Contact Person First North d. Mailing Address e. City/Town h. Phone Number 7. Contact Person First North d. Mailing Address e. City/Town h. Phone Number Total WPA Fee Paid a. Total Fee Paid	a. Street Address Latitude and Longitude, if Known: f. Assessors Map/Plat Number 2. Applicant: a. First Name b. Last Name d. Mailing Address e. City/Town h. Phone Number i. Fax Number 3. Property owner (if different from applicant): a. First Name b. Last Name d. Mailing Address e. City/Town h. Phone Number i. Fax Number 4. Representative (if any): a. Firm b. Contact Person First Name d. Mailing Address e. City/Town i. Fax Number 5. City/Town h. Phone Number i. Fax Number i. Fax Number i. Fax Number d. Mailing Address e. City/Town i. Fax Number Total Person First Name d. Mailing Address e. City/Town h. Phone Number i. Fax Number b. Contact Person First Name d. Mailing Address e. City/Town h. Phone Number i. Fax Number b. State	1. Project Location (Note: electronic filers will click on button for GIS a. Street Address Latitude and Longitude, if Known: d. Latitude f. Assessors Map/Plat Number g. Parcel /Lot Nu g. Parcel /L



WPA Form 3 - Notice of Intent

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40



B. Resource Area Effects

1. Inland Resource Areas

Check all that apply below. Attach narrative and any supporting documentation describing how the project will meet all performance standards for each of the resource areas altered, including standards requiring consideration of alternative project design or location.

Online Users:
Include your
document
transaction
number
(provided on
your receipt
page) with all
supplementary
information you
submit to the
Department.

Resou	rce Area	Size of Proposed Alteration	Proposed Replacement (if any)
a. 🗌	Bank	1. linear feet	2. linear feet
b. 🔲	Bordering Vegetated		2. 111001 1001
U	Wetland	1. square feet	2. square feet
c. 🗌	Land Under	1. square feet	
	Waterbodies and	i. square reet	2. square feet
	Waterways	3. cubic yards dredged	**
d. 🗌	Bordering Land	o. odbio yards dredged	a a a
ч. <u>Г</u>	Subject to Flooding	1. square feet	2. square feet
	- abject to 1 looding		2. Square rect
	100	3. cubic feet of flood storage lost	4. cubic feet of flood storage replaced
е. П	Isolated Land Subject		
	to Flooding	1. square feet	w)
	3	parties and the electricity of contractions	
¥		2. cubic feet of flood storage lost	3. cubic feet of flood storage replaced
. \Box	Disconferent con-		
т. Ц	Riverfront area		
	Name of Material (if all	Habital.	
1.	Name of Waterway (if avail	liable):	8
123		v	
2	Width of Riverfront Area (d	chook one):	
2.	Vildar of ravelrion: Alea (C	sieck one).	
6	☐ 25 ft - Designated F	Densely Developed Areas only	100
V.	Zo it Designated t	bensely beveloped Aleas only	**
	☐ 100 ft New agricul	tural projects only	
25			
	200 ft All other pro	pjects	
3.	Total area of Riverfront Ar	rea on the site of the proposed pro	piect:
	*	The second secon	
-	quare Feet		
. ,	quale reet	340	
4.	Proposed alteration of the	Riverfront Area:	
a	Total Square Feet	b. Square Feet within 100 ft.	a Course Fact between 100 & and 200 &
۵.	Total oquale i eet	b. Square Feet within 100 ft.	c. Square Feet between 100 ft. and 200 ft.
5,	. Has an alternatives analys	sis been done and is it attached to	this NOI? Yes No
6	. Was the lot where the act	ivity is proposed created prior to A	August 1, 1996? Yes No
		080 000	Page 3 of 8





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A.	General Information (continued)					
7.	Project Type Checklist:				N.	
19	a. Single Family Home			14	Di Co	
	b. Residential Subdivision		ě			
	c.	39	i* (s)			
72	d. Commercial/Industrial		×			
	e. Dock/Pier			\$1		
	f. Utilities		8	*	e o	無
	g. Coastal Engineering Structure					
÷	h. Agriculture – cranberries, forestry	*				
	i. Transportation					
	j Other			200		CAN SH
8.	Property recorded at the Registry of Deeds for:		•			*
	a. County					
	b. Book					
					v ×	*,
	c. Page Number					
	d. Certificate # (if registered land)			žI.	32	
9.	Buffer Zone Only					
	Is the project located only in the Buffer Zone of a coastal bank, coastal beach, coastal dune, or sale	bordering v t marsh?	egetated	wetland	l, inland bank,	or
	a. Yes If yes, skip to Section C.		* * 1	*		
	b. No If no, check the resource area	as to be aff	ected by t	his proi	ect directly be	alow



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B. Resource Area Effects (continued)

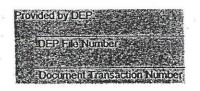
2. Coastal Resource Areas:

Check all that apply below. Attach narrative and supporting documentation describing how the project will meet all performance standards for each of the resource areas altered, including standards requiring consideration of alternative project design or location.

		. as requiring consideration c	alternative project design of loca	auon.
Online Users: Include your	Resou	rce Area	Size of Proposed Alteration	Proposed Replacement (if any)
document transaction	a. 🗌	Designated Port Areas	Indicate size under Land Under	the Ocean, below
number (provided on your receipt	b. 🗌	Land Under the Ocean	1. Square feet	u u
page) with all supplementary	2	w	2. Cubic yards dredged	
information you submit to the	с. 🗌	Barrier Beach	Indicate size under Coastal Bea below	ches and/or Coastal Dunes
Department.	d. 🗌	Coastal Beaches	1. Square feet	Cubic yards beach nourishment
a in a	e. 🗌	Coastal Dunes	1. Square feet	2. Cubic yards dune nourishment
	f. 🗌	Coastal Banks	1. Linear feet	•
	g. 🔲	Rocky Intertidal Shores	1. Square feet	
	h. 🗌	Salt Marshes	1. Square feet	2. Sq ft restoration, rehab., or creation
	i. 🗌	Land Under Salt Ponds	1. Square feet	
			0.01:	
	j. 🔲	Land Containing Shellfish	2. Cubic yards dredged	
			1. Square feet	2. Square feet restoration, rehab.
N (N)	k. 🗌	Fish Runs	Ocean, and/or inland Land Und	iks, inland Bank, Land Under the er Waterbodies and Waterways,
	×		above	
	•			8
	l. 🔲	Land Subject to Coastal	Cubic yards dredged	(*)
		Storm Flowage	1. Square feet	
* * 1		2		a
	3. Li	imited Project:	4.5	**
	Is any 10.24	portion of the proposed action 310 CMR 10.53?	vity eligible to be treated as a limit	ed project subject to 310 CMR
	a. 🔲	Yes No If yes, descri	ribe which limited project applies t	o this project:

b. Limited Project





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11	// \	U	AA I	ı		

C. Bordering Vegetated	Wetland	Delineation	Methodology
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8										
		Check	all met	hods used	I to delineate	the Borde	ring Vegetated	Wetland (B	(VW) boundary	:
Online Users: Include your	ži.	1. 🗌	Final (attac		Resource Area	a Delineati	on issued by C	Conservation	n Commission	or DEP
document transaction		2. 🗌	DEP I	BVW Field	d Data Form (attached)			¥ «	
number (provided on		3. 🗌	Final	Determina	ation of Applic	ability issu	ed by Conser	vation Com	mission or DEF	(attached)
your receipt page) with all supplementary	К	4. 🗌	Other	Methods	for Determini	ng the BV	W Boundary (a	attach docur	mentation):	
information you submit to the		a .	□ 5	0% or mo	re wetland inc	dicator pla	nts		*	er :
Department.		b.		aturated/i	nundated cor	ditions ex	st	٥		78 e
		C.		Groundwat	er indicators	<i>i</i> :		(2) A		
,		d.		irect obse	ervation	8	2 06		. 8	
For all projects affecting other		e.		lydric soil	indicators		AV		er e	
Resource Areas, please		f.		Credible e	vidence of co	nditions pr	ior to disturbar	nce	1	51
attach a narrative						W W			0	
explaining how										
the resource area was		i i						30.0	· · · · · · · · · · · · · · · · · · ·	
delineated.	D.	. Oth	er Ap	plicab	le Standa	ards an	d Require	ements		
	1.	Estim	ated Ha	n of the pr abitat Map Species F	of State-List	ct located ed Rare W	in estimated had telland Wildlife	abitat as ind published I	licated on the i	most recent Heritage and
e		. \square	Yes	☐ No	If you inclu	do proof o	f mailing or ha	nd dolivon	of NOI to:	ø
		w. L	.00			Natural He	ritage and End	langered Sp	oecies Progran	n
¥		15	er ir			C	ivision of Fish			
	*			30			Westboroug	, North Drive gh, MA 0158		0
	0	e e ,		27		ri				
R ₈₀ 8		is a			b. Date of Ma	р				
		5, 1	10.					H E		
2	2.	For c	oastal p	projects or	nly, is any por	tion of the	proposed pro	ject located	below the mea	an high water
		□ Y	es 🗌	No	If yes, inclu	Massa	of mailing or had chusetts Divise 251 Causeway	sion of Marir	ne Fisheries	
		Пк	lot ann	licable – s	roject is in inl	and roce:	* .			
10		L 1	iot app	noable - p		aiiu 16900	de alea ulliy			





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B	D.	Other Applicable Standards and Requirements (continued)	
	3.	Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?	
		a. Yes No If yes, provide name of ACEC (see instructions to WPA Form 3 or DEP Website for ACEC locations). Note: electronic filers click on Website.	
*		b. ACEC	
Online Users: Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the	4.	Is any portion of the site subject to a Wetlands Restriction Order under the Inland Wetlands Restriction Act (M.G.L. c. 131, § 40A) or the Coastal Wetlands Restriction Act (M.G.L. c. 130, § 105))?
		a Yes No	
	5.	Is any activity within any Resource Area or Buffer Zone exempt from performance standards of the wetlands regulations, 310 CMR 10.00.	
		a. Yes No If yes, describe which exemption applies to this project:	
Department.		b. Exemption	
	6.	Is this project subject to the DEP Stormwater Policy? a. Yes No	
		b. If yes, stormwater management measures are required. Applicants should complete Appendix B: Stormwater Management Form and submit it with this form.	
	₽	c. If no, explain why the project is exempt:	
10 to			
2 19 N	_		
	E	. Additional Information	
		Applicants must include the following with this Notice of Intent (NOI). See instructions for details.	
		Online Users: Attach the document transaction number (provided on your receipt page) for any of the following information you submit to the Department.	
		 USGS or other map of the area (along with a narrative description, if necessary) containing sufficient information for the Conservation Commission and the Department to locate the site. (Electronic filers may omit this item.) 	3
# · # * #		2. Plans identifying the location of proposed activities (including activities proposed to serve a Bordering Vegetated Wetland [BVW] replication area or other mitigating measure) relative to the boundaries of each affected resource area.	35



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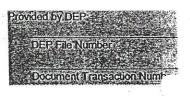
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E	. Addit	tional Information (continued)	
r ir Pir	3. sho	Other material identifying and explaining the down on plans (e.g., a DEP BVW Field Data Form	n).
nline Users:	4.	List the titles and dates for all plans and other	materials submitted with this NOI.
clude your ocument ansaction	5.	If there is more than one property owner, pleated on this form.	se attach a list of these property owners not
umber or	6.	Attach proof of mailing for Natural Heritage ar	nd Endangered Species Program, if needed.
our receipt age) with all	7.	Attach proof of mailing for Massachusetts Div	rision of Marine Fisheries, if needed.
upplementary nformation you	8. 🔲	Attach Appendix A, see next page.	
ubmit to the Department.	9. 🗌	Attach Appendix B, if needed.	
	F. Fee	S	
enin g " g " adjes g	Cons	fees for work proposed under each Notice of Inteservation Commission and the Department (see smittal Form).	ent must be calculated and submitted to the Instructions and Appendix B. Wetland Fee
	No fe	ee shall be assessed for projects of the federal	government, the Department, or cities and towns
	of th	e Commonwealth.	
	App	licants must submit the following information (in firm fee payment:	addition to pages 1 and 2 of Appendix B) to
			* · · · · · · · · · · · · · · · · · · ·
	1. M	unicipal Check Number	2. Check date
	1	tate Check Number	4. Check date
v.	5. P	ayor name on check: First Name	6. Payor name on check: Last Name



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G. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Notice of Intent and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge. I understand that the Conservation Commission will place notification of this Notice in a local newspaper at the expense of the applicant in accordance with the wetlands regulations, 310 CMR 10.05(5)(a).

I further certify under penalties of perjury that all abutters were notified of this application, pursuant to the requirements of M.G.L. c. 131, § 40. Notice must be made in writing by hand delivery or certified mail (return receipt requested) to all abutters within 100 feet of the property line of the project location.

Signature of Applicant	 Date	
Signature of Property Owner (if different)	Date	
Signature of Representative (if any)	 Date	

For Conservation Commission:

Two copies of the completed Notice of Intent (Form 3), including supporting plans and documents; two copies of pages 1 and 2 of Appendix B; and the city/town fee payment must be sent to the Conservation Commission by certified mail or hand delivery.

For DEP:

One copy of the completed Notice of Intent (Form 3), including supporting plans and documents; one copy of pages 1 and 2 of Appendix B; and a copy of the state fee payment must be sent to the DEP Regional Office (see Instructions) by certified mail or hand delivery. (E-filers may submit these electronically.)

Other

If the applicant has checked the "yes" box in any part of Section D, Item 3, above, refer to that section and the Instructions for additional submittal requirements.

The original and copies must be sent simultaneously. Failure by the applicant to send copies in a timely manner may result in dismissal of the Notice of Intent.

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