



Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Wetlands

Winchendon
City/Town

WPA Form 1- Request for Determination of Applicability
Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

A. General Information

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Applicant:

John Harrison

Name

913 Northfield Rd

Mailing Address

Lunenburg MA

City/Town

978 758 7402

Phone Number

Brittvia Homes @
brittviahomesandconstruction@

E-Mail Address

MA

State

01462

Zip Code

Fax Number (if applicable)

2. Representative (if any):

Firm

Contact Name

E-Mail Address

Mailing Address

City/Town

State

Zip Code

Phone Number

Fax Number (if applicable)

B. Determinations

1. I request the Winchendon Conservation Commission make the following determination(s). Check any that apply:

- a. whether the **area** depicted on plan(s) and/or map(s) referenced below is an area subject to jurisdiction of the Wetlands Protection Act.
- b. whether the **boundaries** of resource area(s) depicted on plan(s) and/or map(s) referenced below are accurately delineated.
- c. whether the **work** depicted on plan(s) referenced below is subject to the Wetlands Protection Act.
- d. whether the area and/or work depicted on plan(s) referenced below is subject to the jurisdiction of any **municipal wetlands ordinance** or **bylaw** of:

Winchendon
Name of Municipality

- e. whether the following **scope of alternatives** is adequate for work in the Riverfront Area as depicted on referenced plan(s).



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C. Project Description

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

310 Main St Winchendon
Street Address City/Town
734-0-27
Assessors Map/Plat Number Parcel/Lot Number

- b. Area Description (use additional paper, if necessary):

House at 310 Main St, Winchendon

- c. Plan and/or Map Reference(s):

Title	Date

2. a. Work Description (use additional paper and/or provide plan(s) of work, if necessary):

- Remove existing deck, rebuild to same dimensions of 10'x8'
- Add 11' x 15' wrap around deck to back door, 4' wide
- Plans attached



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C. Project Description (cont.)

b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary).

3. a. If this application is a Request for Determination of Scope of Alternatives for work in the Riverfront Area, indicate the one classification below that best describes the project.

- Single family house on a lot recorded on or before 8/1/96
- Single family house on a lot recorded after 8/1/96
- Expansion of an existing structure on a lot recorded after 8/1/96
- Project, other than a single family house or public project, where the applicant owned the lot before 8/7/96
- New agriculture or aquaculture project
- Public project where funds were appropriated prior to 8/7/96
- Project on a lot shown on an approved, definitive subdivision plan where there is a recorded deed restriction limiting total alteration of the Riverfront Area for the entire subdivision
- Residential subdivision; institutional, industrial, or commercial project
- Municipal project
- District, county, state, or federal government project
- Project required to evaluate off-site alternatives in more than one municipality in an Environmental Impact Report under MEPA or in an alternatives analysis pursuant to an application for a 404 permit from the U.S. Army Corps of Engineers or 401 Water Quality Certification from the Department of Environmental Protection.

b. Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classification above (use additional paper and/or attach appropriate documents, if necessary.)



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D. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Request for Determination of Applicability and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge.

I further certify that the property owner, if different from the applicant, and the appropriate DEP Regional Office were sent a complete copy of this Request (including all appropriate documentation) simultaneously with the submittal of this Request to the Conservation Commission.

Failure by the applicant to send copies in a timely manner may result in dismissal of the Request for Determination of Applicability.

Name and address of the property owner:

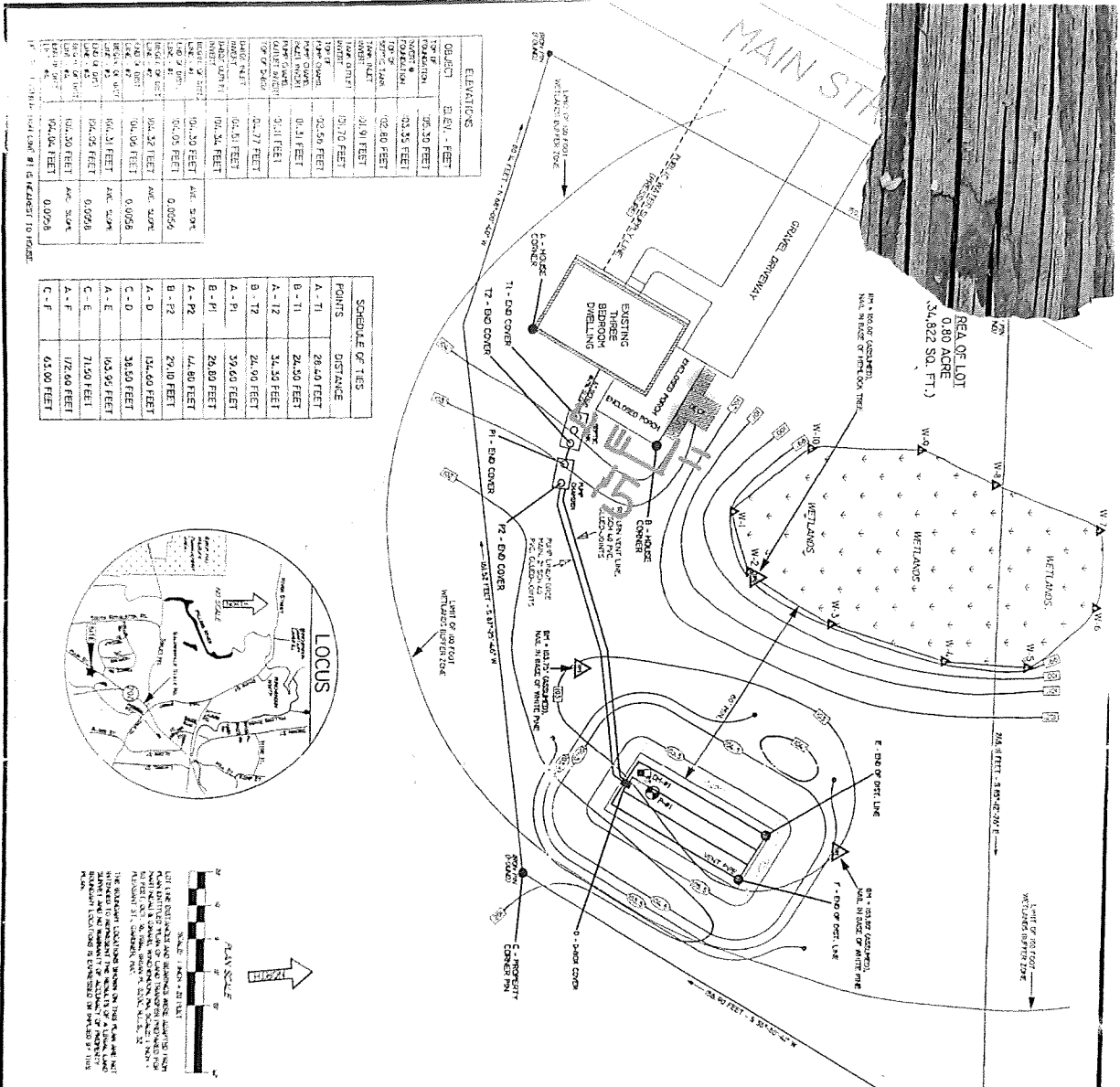
Martina Gerace
Name
310 Main St
Mailing Address
Winchendon
City/Town
MA 01475
State Zip Code

Signatures:

I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

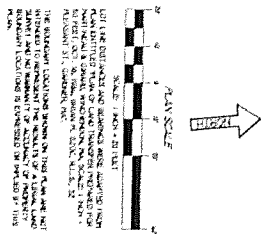
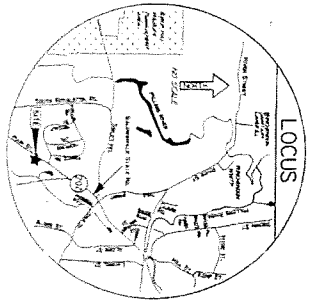
[Signature] 4/10/24
Signature of Applicant Date

Signature of Representative (if any) Date



ELEVATIONS	
OBJECT	EL. ELEV. - FEET
FOUNDATION	02.30 FEET
FLOOR FINISH	02.35 FEET
CEILING FINISH	02.80 FEET
ROOF FINISH	01.91 FEET
TOP OF ROOF	01.70 FEET
TOP OF WALL	02.50 FEET
TOP OF ROOF	01.31 FEET
TOP OF WALL	01.77 FEET
ROOF FINISH	02.31 FEET
FOUNDATION	02.30 FEET
FLOOR FINISH	02.35 FEET
CEILING FINISH	02.80 FEET
ROOF FINISH	01.91 FEET
TOP OF ROOF	01.70 FEET
TOP OF WALL	02.50 FEET
TOP OF ROOF	01.31 FEET
TOP OF WALL	01.77 FEET
ROOF FINISH	02.31 FEET

SCHEDULE OF TIES	
POINTS	DISTANCE
A - T1	28.40 FEET
B - T1	24.50 FEET
A - T2	24.50 FEET
B - T2	24.00 FEET
A - T3	39.60 FEET
B - T3	26.80 FEET
A - T4	42.80 FEET
B - T4	29.10 FEET
A - T5	38.50 FEET
B - T5	103.95 FEET
A - T6	71.50 FEET
A - T7	112.60 FEET
C - F	61.00 FEET



LOT LINE DIMENSIONS AND SPACING AND ALL DIMENSIONS ARE TO CENTERLINE UNLESS OTHERWISE NOTED. ALL DIMENSIONS ARE TO CENTERLINE UNLESS OTHERWISE NOTED.

DELINER ENGINEERING
 P.O. BOX 189
 WINCHENDON, MA 01475 (978) 249-8214

AS-BUILT PLANS FOR AN ON-SITE SEWAGE DISPOSAL SYSTEM FOR AN EXISTING THREE BEDROOM DWELLING AT 310 MAIN STREET WINCHENDON, MA OWNED BY DOUG AND GINDY ROBBINS

ENGINEER'S CERTIFICATION
 FOR CONSTRUCTION/REPAIR OF AN ON-SITE SEWAGE DISPOSAL SYSTEM
 PROJECT TYPE: REPAIR AT EXISTING DWELLING - COMPLETE NEW SEWAGE DISPOSAL SYSTEM.
 INSTALLER: ERIC SPINALE, 214 BLOSSOM STREET, FITCHBURG, MA 01525
 DESIGN ENGINEER: JOHN DELANEY/DELINER ENGINEERING
 INSPECTOR/DATE: JAMES J. STANLEY, 2001 - STANLEY ST. WINDHAM, VT 05091
 APPROX. 1,200' - INSPECTOR JAMES J. STANLEY, 2001 - STANLEY ST. WINDHAM, VT 05091
 TO SUPERSEDE AND COMPLETE JAMES J. STANLEY, 2001 - STANLEY ST. WINDHAM, VT 05091

CERTIFICATION:
 I, JOHN DELANEY, REGISTERED PROFESSIONAL ENGINEER, STATE OF MASSACHUSETTS, LICENSE NO. 110,000, HEREBY CERTIFY THAT THE ON-SITE SEWAGE DISPOSAL SYSTEM SHOWN ON THESE PLANS WAS DESIGNED AND CONSTRUCTED IN ACCORDANCE WITH THE MASSACHUSETTS REGULATIONS AND ORDINANCES GOVERNING THE DESIGN AND CONSTRUCTION OF ON-SITE SEWAGE DISPOSAL SYSTEMS. I HAVE REVIEWED THE PLANS AND FOUND THEM TO BE IN ACCORDANCE WITH THE REGULATIONS AND ORDINANCES GOVERNING THE DESIGN AND CONSTRUCTION OF ON-SITE SEWAGE DISPOSAL SYSTEMS. I HAVE ALSO REVIEWED THE CONSTRUCTION AND FOUND IT TO BE IN ACCORDANCE WITH THE REGULATIONS AND ORDINANCES GOVERNING THE DESIGN AND CONSTRUCTION OF ON-SITE SEWAGE DISPOSAL SYSTEMS.

Checked By: JMD
 Drawn By: JMD
 Design Date: 06/01/01
 Design No: 010101
 Office: Winchendon, MA 01475



John M. Delaney, Jr.
 Professional Engineer
 State of Massachusetts
 License No. 110,000