

# TOWN OF WINCHENDON

Conservation Commission



109 Front Street  
Winchendon, Massachusetts 01475-1758

WINCHENDON TOWN CLERK  
RCUD JUN 29 2022 PM4:40  
Telephone (978) 297-5410

DJH

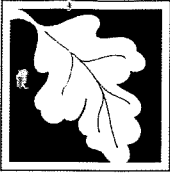
## Legal Notice Winchendon Conservation Commission

Pursuant to the provisions of M.G.L. Chapter 131, Section 40, and the Town of Winchendon Wetlands Protection Bylaw, the Winchendon Conservation Commission will hold a public hearing on Thursday, July 14, 2022 at 7:05 pm to consider the Notice of Intent filed by applicant Chris Kapsimalis, owner Julie Horman (Deceased) of 770 River Street, Assessors Map 4 Parcel 136. Construction of a septic system to serve an existing dwelling within the 100' buffer zone of a wetland. The hearing will be held in the Second Floor Auditorium at Town Hall - 109 Front St., Winchendon, MA 01475. Alternative translation and accommodation for disabled persons is available by advance request.

For additional information email [mmarro@townofwinchendon.com](mailto:mmarro@townofwinchendon.com).

July 6, 2022





Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

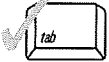
Winchendon

City/Town

# WPA Form 3 – Notice of Intent

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

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



**Note:**  
Before completing this form consult your local Conservation Commission regarding any municipal bylaw or ordinance.

## A. General Information

1. Project Location (**Note:** electronic filers will click on button to locate project site):

770 River Street  
a. Street Address

Winchendon  
b. City/Town

01475  
c. Zip Code

Latitude and Longitude:  
42.68438  
d. Latitude

-72.10366  
e. Longitude

4  
f. Assessors Map/Plat Number

136  
g. Parcel /Lot Number

2. Applicant:

Chris  
a. First Name

Kapsimalis  
b. Last Name

c. Organization

25 Pinewood Road  
d. Street Address

Bolton  
e. City/Town

MA  
f. State

01740  
g. Zip Code

chris.kapsimalis87@gmail.com  
j. Email Address

h. Phone Number

i. Fax Number

3. Property owner (required if different from applicant):  Check if more than one owner

Julie  
a. First Name

Horman (Deceased)  
b. Last Name

c. Organization

770 River Street  
d. Street Address

Winchendon  
e. City/Town

MA  
f. State

01475  
g. Zip Code

h. Phone Number

i. Fax Number

j. Email address

4. Representative (if any):

Trevor  
a. First Name

Fletcher  
b. Last Name

GRAZ Engineering, LLC  
c. Company

323 W Lake Road  
d. Street Address

Fitzwilliam  
e. City/Town

NH  
f. State

03447  
g. Zip Code

603-585-6959  
h. Phone Number

i. Fax Number

trevorfletcher91@yahoo.com  
j. Email address

5. Total WPA Fee Paid (from NOI Wetland Fee Transmittal Form):

\$110.00  
a. Total Fee Paid

\$42.50  
b. State Fee Paid

\$142.50 (\$75 Local Bylaw)  
c. City/Town Fee Paid



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Bureau of Resource Protection - Wetlands

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**A. General Information (continued)**

6. General Project Description:

We are proposing the construction of a septic system partially within the 50' buffer zone of a wetland to service an existing house.

7a. Project Type Checklist: (Limited Project Types see Section A. 7b.)

- |   |   |
|---|---|
| 1. <input checked="" type="checkbox"/> Single Family Home             | 2. <input type="checkbox"/> Residential Subdivision       |
| 3. <input type="checkbox"/> Commercial/Industrial                     | 4. <input type="checkbox"/> Dock/Pier                     |
| 5. <input type="checkbox"/> Utilities                                 | 6. <input type="checkbox"/> Coastal engineering Structure |
| 7. <input type="checkbox"/> Agriculture (e.g., cranberries, forestry) | 8. <input type="checkbox"/> Transportation                |
| 9. <input type="checkbox"/> Other                                     |   |

7b. Is any portion of the proposed activity eligible to be treated as a limited project (including Ecological Restoration Limited Project) subject to 310 CMR 10.24 (coastal) or 310 CMR 10.53 (inland)?

1.  Yes  No      If yes, describe which limited project applies to this project. (See 310 CMR 10.24 and 10.53 for a complete list and description of limited project types)

2. Limited Project Type

If the proposed activity is eligible to be treated as an Ecological Restoration Limited Project (310 CMR10.24(8), 310 CMR 10.53(4)), complete and attach Appendix A: Ecological Restoration Limited Project Checklist and Signed Certification.

8. Property recorded at the Registry of Deeds for:

Worcester

a. County

30935

c. Book

b. Certificate # (if registered land)

342

d. Page Number

**B. Buffer Zone & Resource Area Impacts (temporary & permanent)**

- Buffer Zone Only – Check if the project is located only in the Buffer Zone of a Bordering Vegetated Wetland, Inland Bank, or Coastal Resource Area.
- Inland Resource Areas (see 310 CMR 10.54-10.58; if not applicable, go to Section B.3, Coastal 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.



**Massachusetts Department of Environmental Protection**  
 Bureau of Resource Protection - Wetlands

Provided by MassDEP:  
 \_\_\_\_\_  
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Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

**B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)**

For all projects affecting other Resource Areas, please attach a narrative explaining how the resource area was delineated.

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Bank	1. linear feet _____	2. linear feet _____
b. <input type="checkbox"/> Bordering Vegetated Wetland	1. square feet _____	2. square feet _____
c. <input type="checkbox"/> Land Under Waterbodies and Waterways	1. square feet _____ 3. cubic yards dredged _____	2. square feet _____

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet _____ 3. cubic feet of flood storage lost _____	2. square feet _____ 4. cubic feet replaced _____
e. <input type="checkbox"/> Isolated Land Subject to Flooding	1. square feet _____ 2. cubic feet of flood storage lost _____	3. cubic feet replaced _____
f. <input type="checkbox"/> Riverfront Area	1. Name of Waterway (if available) - <b>specify coastal or inland</b> _____	

2. Width of Riverfront Area (check one):

- 25 ft. - Designated Densely Developed Areas only
- 100 ft. - New agricultural projects only
- 200 ft. - All other projects

3. Total area of Riverfront Area on the site of the proposed project: \_\_\_\_\_ square feet

4. Proposed alteration of the Riverfront Area:

a. total square feet \_\_\_\_\_ b. square feet within 100 ft. \_\_\_\_\_ c. square feet between 100 ft. and 200 ft. \_\_\_\_\_

5. Has an alternatives analysis been done and is it attached to this NOI?  Yes  No

6. Was the lot where the activity is proposed created prior to August 1, 1996?  Yes  No

3.  Coastal Resource Areas: (See 310 CMR 10.25-10.35)

**Note:** for coastal riverfront areas, please complete **Section B.2.f.** above.



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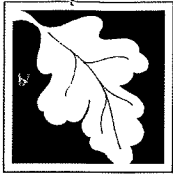
City/Town

**B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)**

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.

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

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Designated Port Areas	Indicate size under Land Under the Ocean, below	
b. <input type="checkbox"/> Land Under the Ocean	1. square feet _____	
	2. cubic yards dredged _____	
c. <input type="checkbox"/> Barrier Beach	Indicate size under Coastal Beaches and/or Coastal Dunes below	
d. <input type="checkbox"/> Coastal Beaches	1. square feet _____	2. cubic yards beach nourishment _____
e. <input type="checkbox"/> Coastal Dunes	1. square feet _____	2. cubic yards dune nourishment _____
	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
f. <input type="checkbox"/> Coastal Banks	1. linear feet _____	
g. <input type="checkbox"/> Rocky Intertidal Shores	1. square feet _____	
h. <input type="checkbox"/> Salt Marshes	1. square feet _____	2. sq ft restoration, rehab., creation _____
i. <input type="checkbox"/> Land Under Salt Ponds	1. square feet _____	
	2. cubic yards dredged _____	
j. <input type="checkbox"/> Land Containing Shellfish	1. square feet _____	
k. <input type="checkbox"/> Fish Runs	Indicate size under Coastal Banks, inland Bank, Land Under the Ocean, and/or inland Land Under Waterbodies and Waterways, above	
	1. cubic yards dredged _____	
l. <input type="checkbox"/> Land Subject to Coastal Storm Flowage	1. square feet _____	
4. <input type="checkbox"/> Restoration/Enhancement	If the project is for the purpose of restoring or enhancing a wetland resource area in addition to the square footage that has been entered in Section B.2.b or B.3.h above, please enter the additional amount here.	
	a. square feet of BVW _____	b. square feet of Salt Marsh _____
5. <input type="checkbox"/> Project Involves Stream Crossings		
	a. number of new stream crossings _____	b. number of replacement stream crossings _____



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## C. Other Applicable Standards and Requirements

- This is a proposal for an Ecological Restoration Limited Project. Skip Section C and complete Appendix A: Ecological Restoration Limited Project Checklists – Required Actions (310 CMR 10.11).

### Streamlined Massachusetts Endangered Species Act/Wetlands Protection Act Review

- Is any portion of the proposed project located in **Estimated Habitat of Rare Wildlife** as indicated on the most recent Estimated Habitat Map of State-Listed Rare Wetland Wildlife published by the Natural Heritage and Endangered Species Program (NHESP)? To view habitat maps, see the *Massachusetts Natural Heritage Atlas* or go to [http://maps.massgis.state.ma.us/PRI\\_EST\\_HAB/viewer.htm](http://maps.massgis.state.ma.us/PRI_EST_HAB/viewer.htm).

- a.  Yes  No **If yes, include proof of mailing or hand delivery of NOI to:**

Natural Heritage and Endangered Species Program  
 Division of Fisheries and Wildlife  
 1 Rabbit Hill Road  
 Westborough, MA 01581

- MassGIS \_\_\_\_\_  
 b. Date of map

If yes, the project is also subject to Massachusetts Endangered Species Act (MESA) review (321 CMR 10.18). To qualify for a streamlined, 30-day, MESA/Wetlands Protection Act review, please complete Section C.1.c, and include requested materials with this Notice of Intent (NOI); *OR* complete Section C.2.f, if applicable. *If MESA supplemental information is not included with the NOI, by completing Section 1 of this form, the NHESP will require a separate MESA filing which may take up to 90 days to review (unless noted exceptions in Section 2 apply, see below).*

- Submit Supplemental Information for Endangered Species Review\*
  - Percentage/acreage of property to be altered:
 

(a) within wetland Resource Area	percentage/acreage
(b) outside Resource Area	percentage/acreage
  - Assessor's Map or right-of-way plan of site
- Project plans for entire project site, including wetland resource areas and areas outside of wetlands jurisdiction, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work \*\*
  - Project description (including description of impacts outside of wetland resource area & buffer zone)
  - Photographs representative of the site

\* Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review (see <http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/>). Priority Habitat includes habitat for state-listed plants and strictly upland species not protected by the Wetlands Protection Act.

\*\* MESA projects may not be segmented (321 CMR 10.16). The applicant must disclose full development plans even if such plans are not required as part of the Notice of Intent process.



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**C. Other Applicable Standards and Requirements (cont'd)**

- (c)  MESA filing fee (fee information available at [http://www.mass.gov/dfwele/dfw/nhosp/regulatory\\_review/mesa/mesa\\_fee\\_schedule.htm](http://www.mass.gov/dfwele/dfw/nhosp/regulatory_review/mesa/mesa_fee_schedule.htm)). Make check payable to "Commonwealth of Massachusetts - NHESP" and **mail to NHESP** at above address

*Projects altering 10 or more acres of land, also submit:*

- (d)  Vegetation cover type map of site
- (e)  Project plans showing Priority & Estimated Habitat boundaries
- (f) OR Check One of the Following
1.  Project is exempt from MESA review.  
Attach applicant letter indicating which MESA exemption applies. (See 321 CMR 10.14, [http://www.mass.gov/dfwele/dfw/nhosp/regulatory\\_review/mesa/mesa\\_exemptions.htm](http://www.mass.gov/dfwele/dfw/nhosp/regulatory_review/mesa/mesa_exemptions.htm); the NOI must still be sent to NHESP if the project is within estimated habitat pursuant to 310 CMR 10.37 and 10.59.)
2.  Separate MESA review ongoing. a. NHESP Tracking # \_\_\_\_\_ b. Date submitted to NHESP \_\_\_\_\_
3.  Separate MESA review completed.  
Include copy of NHESP "no Take" determination or valid Conservation & Management Permit with approved plan.
3. For coastal projects only, is any portion of the proposed project located below the mean high water line or in a fish run?
- a.  Not applicable – project is in inland resource area only      b.  Yes     No

If yes, include proof of mailing, hand delivery, or electronic delivery of NOI to either:

South Shore - Cohasset to Rhode Island border, and the Cape & Islands:

Division of Marine Fisheries -  
Southeast Marine Fisheries Station  
Attn: Environmental Reviewer  
836 South Rodney French Blvd.  
New Bedford, MA 02744  
Email: [DMF.EnvReview-South@state.ma.us](mailto:DMF.EnvReview-South@state.ma.us)

North Shore - Hull to New Hampshire border:

Division of Marine Fisheries -  
North Shore Office  
Attn: Environmental Reviewer  
30 Emerson Avenue  
Gloucester, MA 01930  
Email: [DMF.EnvReview-North@state.ma.us](mailto:DMF.EnvReview-North@state.ma.us)

Also if yes, the project may require a Chapter 91 license. For coastal towns in the Northeast Region, please contact MassDEP's Boston Office. For coastal towns in the Southeast Region, please contact MassDEP's Southeast Regional Office.





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## WPA Form 3 – Notice of Intent

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### C. Other Applicable Standards and Requirements (cont'd)

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

4. 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 MassDEP Website for ACEC locations). **Note:** electronic filers click on Website.
- b. ACEC \_\_\_\_\_
5. Is any portion of the proposed project within an area designated as an Outstanding Resource Water (ORW) as designated in the Massachusetts Surface Water Quality Standards, 314 CMR 4.00?
- a.  Yes  No
6. 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
7. Is this project subject to provisions of the MassDEP Stormwater Management Standards?
- a.  Yes. Attach a copy of the Stormwater Report as required by the Stormwater Management Standards per 310 CMR 10.05(6)(k)-(q) and check if:
1.  Applying for Low Impact Development (LID) site design credits (as described in Stormwater Management Handbook Vol. 2, Chapter 3)
  2.  A portion of the site constitutes redevelopment
  3.  Proprietary BMPs are included in the Stormwater Management System.
- b.  No. Check why the project is exempt:
1.  Single-family house
  2.  Emergency road repair
  3.  Small Residential Subdivision (less than or equal to 4 single-family houses or less than or equal to 4 units in multi-family housing project) with no discharge to Critical Areas.

### D. Additional Information

- This is a proposal for an Ecological Restoration Limited Project. Skip Section D and complete Appendix A: Ecological Restoration Notice of Intent – Minimum Required Documents (310 CMR 10.12).

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.

1.  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.)
2.  Plans identifying the location of proposed activities (including activities proposed to serve as a Bordering Vegetated Wetland [BVW] replication area or other mitigating measure) relative to the boundaries of each affected resource area.



**Massachusetts Department of Environmental Protection**  
Bureau of Resource Protection - Wetlands

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**D. Additional Information (cont'd)**

3.  Identify the method for BVW and other resource area boundary delineations (MassDEP BVW Field Data Form(s), Determination of Applicability, Order of Resource Area Delineation, etc.), and attach documentation of the methodology.

4.  List the titles and dates for all plans and other materials submitted with this NOI.

Septic System Upgrade & NOI Plan

a. Plan Title

GRAZ Engineering, LLC

Paul F. Grasewicz

b. Prepared By

c. Signed and Stamped by

6/29/22

1"=20'

d. Final Revision Date

e. Scale

f. Additional Plan or Document Title

g. Date

5.  If there is more than one property owner, please attach a list of these property owners not listed on this form.
6.  Attach proof of mailing for Natural Heritage and Endangered Species Program, if needed.
7.  Attach proof of mailing for Massachusetts Division of Marine Fisheries, if needed.
8.  Attach NOI Wetland Fee Transmittal Form
9.  Attach Stormwater Report, if needed.

**E. Fees**

1.  Fee Exempt: No filing fee shall be assessed for projects of any city, town, county, or district of the Commonwealth, federally recognized Indian tribe housing authority, municipal housing authority, or the Massachusetts Bay Transportation Authority.

Applicants must submit the following information (in addition to pages 1 and 2 of the NOI Wetland Fee Transmittal Form) to confirm fee payment:

5085

2. Municipal Check Number

6/28/22

3. Check date

5086

4. State Check Number

6/28/22

5. Check date

Paul

6. Payor name on check: First Name

Grasewicz

7. Payor name on check: Last Name



**Massachusetts Department of Environmental Protection**  
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**F. 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 by Certificate of Mailing or 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.

Chris Kupersmidt  
1. Signature of Applicant

6/29/22  
2. Date

3. Signature of Property Owner (if different)

4. Date

[Signature]  
5. Signature of Representative (if any)

6/29/22  
6. Date

**For Conservation Commission:**

Two copies of the completed Notice of Intent (Form 3), including supporting plans and documents, two copies of the NOI Wetland Fee Transmittal Form, and the city/town fee payment, to the Conservation Commission by certified mail or hand delivery.

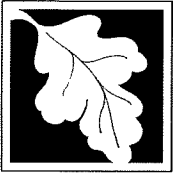
**For MassDEP:**

One copy of the completed Notice of Intent (Form 3), including supporting plans and documents, one copy of the NOI Wetland Fee Transmittal Form, and a **copy** of the state fee payment to the MassDEP Regional Office (see Instructions) by certified mail or hand delivery.

**Other:**

If the applicant has checked the "yes" box in any part of Section C, 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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**NOI Wetland Fee Transmittal Form**  
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

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



**A. Applicant Information**

1. Location of Project:

770 River Street Winchendon  
 a. Street Address b. City/Town  
 5086 \$42.50  
 c. Check number d. Fee amount

2. Applicant Mailing Address:

Chris Kapsimalis  
 a. First Name b. Last Name  
 c. Organization  
 25 Pinewood Road  
 d. Mailing Address  
 Bolton MA 01740  
 e. City/Town f. State g. Zip Code  
 h. Phone Number i. Fax Number  
 j. Email Address chris.kapsimalis87@gmail.com

3. Property Owner (if different):

Julie Horman (Deceased)  
 a. First Name b. Last Name  
 c. Organization  
 770 River Street  
 d. Mailing Address  
 Winchendon MA 01475  
 e. City/Town f. State g. Zip Code  
 h. Phone Number i. Fax Number  
 j. Email Address

To calculate filing fees, refer to the category fee list and examples in the instructions for filling out WPA Form 3 (Notice of Intent).

**B. Fees**

Fee should be calculated using the following process & worksheet. **Please see Instructions before filling out worksheet.**

**Step 1/Type of Activity:** Describe each type of activity that will occur in wetland resource area and buffer zone.

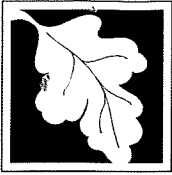
**Step 2/Number of Activities:** Identify the number of each type of activity.

**Step 3/Individual Activity Fee:** Identify each activity fee from the six project categories listed in the instructions.

**Step 4/Subtotal Activity Fee:** Multiply the number of activities (identified in Step 2) times the fee per category (identified in Step 3) to reach a subtotal fee amount. Note: If any of these activities are in a Riverfront Area in addition to another Resource Area or the Buffer Zone, the fee per activity should be multiplied by 1.5 and then added to the subtotal amount.

**Step 5/Total Project Fee:** Determine the total project fee by adding the subtotal amounts from Step 4.

**Step 6/Fee Payments:** To calculate the state share of the fee, divide the total fee in half and subtract \$12.50. To calculate the city/town share of the fee, divide the total fee in half and add \$12.50.



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 Bureau of Resource Protection - Wetlands  
**NOI Wetland Fee Transmittal Form**  
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

**B. Fees** (continued)

Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
Work on a septic system	1	\$110.00	\$110.00
Local Bylaw	1	\$75.00	

**Step 5/Total Project Fee:** \$185.00

**Step 6/Fee Payments:**

Total Project Fee:	\$185.00
State share of filing Fee:	a. Total Fee from Step 5 \$42.50
City/Town share of filing Fee:	b. 1/2 Total Fee less \$12.50 \$142.50
	c. 1/2 Total Fee plus \$12.50

**C. Submittal Requirements**

- a.) Complete pages 1 and 2 and send with a check or money order for the state share of the fee, payable to the Commonwealth of Massachusetts.

Department of Environmental Protection  
 Box 4062  
 Boston, MA 02211

- b.) **To the Conservation Commission:** Send the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and the city/town fee payment.

**To MassDEP Regional Office** (see Instructions): Send a copy of the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and a copy of the state fee payment. (E-filers of Notices of Intent may submit these electronically.)

Notification to Abutters Under the  
Massachusetts Wetlands Protection Act

In accordance with the second paragraph Massachusetts General Laws Chapter 131, Section 40, you are hereby notified of the following.

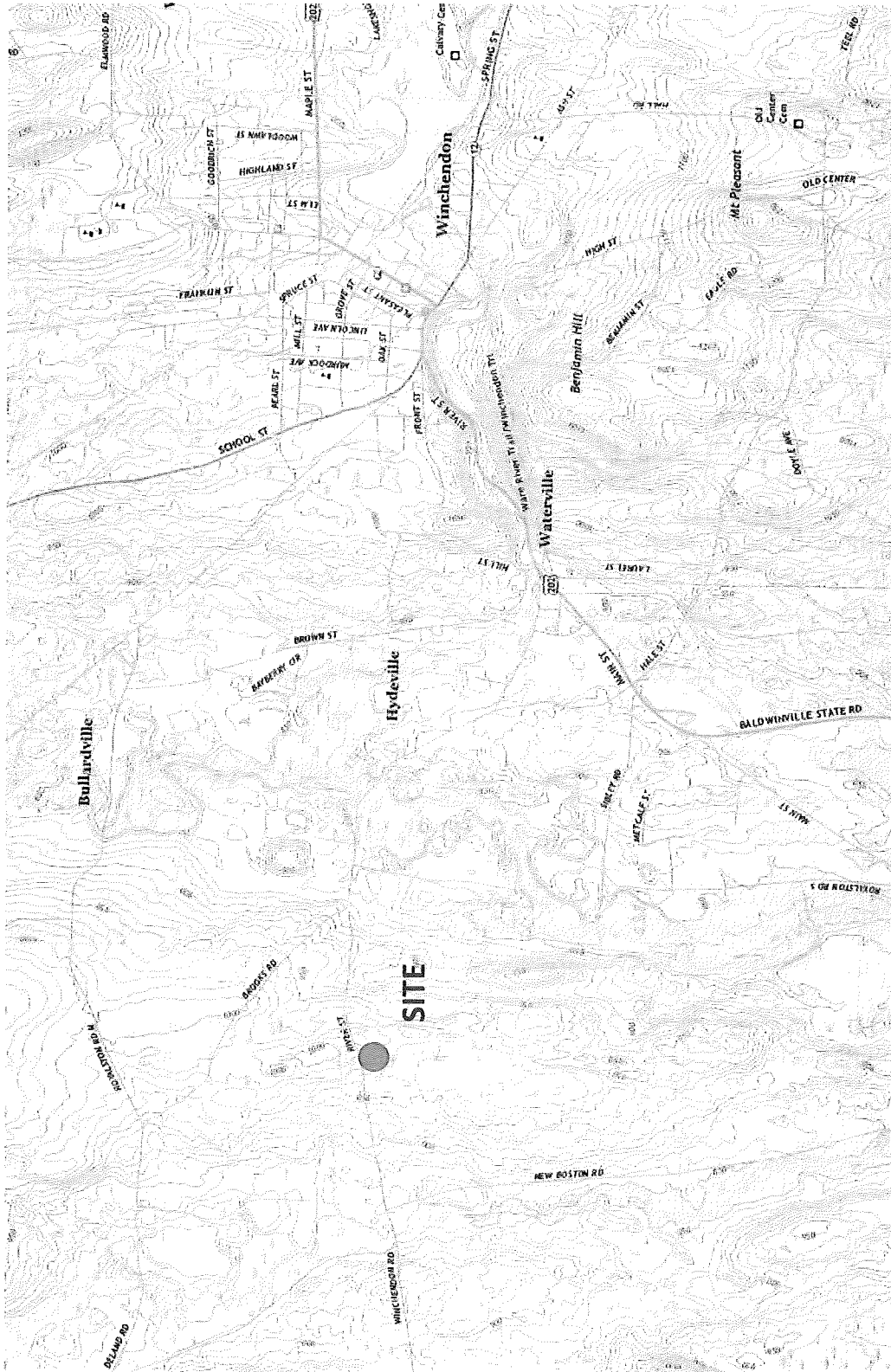
- A. The name of the applicant is Chris Kapsimalis.
- B. The applicant has filed a Notice of Intent with the Conservation Commission for the municipality of Winchendon seeking permission to remove, fill, dredge or alter an Area Subject to Protection under the Wetlands Protection Act (General Laws Chapter 131, Section 40). Specifically, the construction of a septic system partially within the 50' buffer of a wetland to serve an existing dwelling (770 River Street).
- C. The address of the lot where the activity is proposed is 770 River Street; Winchendon, MA (Map-4 Lot-136).
- D. Copies of the Notice of Intent may be examined at GRAZ Engineering LLC, 323 West Lake Road, Fitzwilliam, NH 03447 between the hours of 8am and 4 pm Monday through Friday by appointment only. For copies call 603-585-6959.
- E. Information regarding the date, time, and place of the public hearing may be obtained from the Winchendon Conservation Commission by checking the town website's meeting/agenda list or by calling Matthew Marro at 978-314-7858.
- F. Notice of public hearing, including date, time, and place, will be published in the newspaper at least 5 days in advance of the hearing.

Note: Notice of the public hearing, including its date, time, and location will be posted in the city or town hall not less than forty-eight hours in advance of hearing. At this time, the hearing is planned for July 14, 2022, at 6:00 P.M. Please verify if interested.

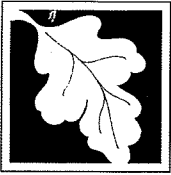
Note: You may also contact your local Conservation Commission or the nearest Department of Environmental Protection Regional Office for more information about this application or the Wetlands Protection Act. To contact DEP, call:

Central Region:508-792-7650  
Southeast Region:508-946-2700

Northeast Region:617-654-6500  
Western Region:413-784-1100



USGS Map



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

Winchendon

City/Town

# WPA Form 3 – Notice of Intent

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

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



**Note:**  
Before completing this form consult your local Conservation Commission regarding any municipal bylaw or ordinance.

## A. General Information

1. Project Location (**Note:** electronic filers will click on button to locate project site):

770 River Street  
a. Street Address

Winchendon  
b. City/Town

01475  
c. Zip Code

Latitude and Longitude:  
42.68438  
d. Latitude

-72.10366  
e. Longitude

4  
f. Assessors Map/Plat Number

136  
g. Parcel /Lot Number

2. Applicant:

Chris  
a. First Name

Kapsimalis  
b. Last Name

c. Organization

25 Pinewood Road  
d. Street Address

Bolton  
e. City/Town

MA  
f. State

01740  
g. Zip Code

chris.kapsimalis87@gmail.com  
j. Email Address

h. Phone Number

i. Fax Number

3. Property owner (required if different from applicant):  Check if more than one owner

Julie  
a. First Name

Horman (Deceased)  
b. Last Name

c. Organization

770 River Street  
d. Street Address

Winchendon  
e. City/Town

MA  
f. State

01475  
g. Zip Code

h. Phone Number

i. Fax Number

j. Email address

4. Representative (if any):

Trevor  
a. First Name

Fletcher  
b. Last Name

GRAZ Engineering, LLC  
c. Company

323 W Lake Road  
d. Street Address

Fitzwilliam  
e. City/Town

NH  
f. State

03447  
g. Zip Code

603-585-6959  
h. Phone Number

i. Fax Number

trevorfletcher91@yahoo.com  
j. Email address

5. Total WPA Fee Paid (from NOI Wetland Fee Transmittal Form):

\$110.00  
a. Total Fee Paid

\$42.50  
b. State Fee Paid

\$142.50 (\$75 Local Bylaw)  
c. City/Town Fee Paid





Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

## WPA Form 3 – Notice of Intent

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

Provided by MassDEP:

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### A. General Information (continued)

6. General Project Description:

We are proposing the construction of a septic system partially within the 50' buffer zone of a wetland to service an existing house.

7a. Project Type Checklist: (Limited Project Types see Section A. 7b.)

- |   |   |
|---|---|
| 1. <input checked="" type="checkbox"/> Single Family Home             | 2. <input type="checkbox"/> Residential Subdivision       |
| 3. <input type="checkbox"/> Commercial/Industrial                     | 4. <input type="checkbox"/> Dock/Pier                     |
| 5. <input type="checkbox"/> Utilities                                 | 6. <input type="checkbox"/> Coastal engineering Structure |
| 7. <input type="checkbox"/> Agriculture (e.g., cranberries, forestry) | 8. <input type="checkbox"/> Transportation                |
| 9. <input type="checkbox"/> Other                                     |   |

7b. Is any portion of the proposed activity eligible to be treated as a limited project (including Ecological Restoration Limited Project) subject to 310 CMR 10.24 (coastal) or 310 CMR 10.53 (inland)?

1.  Yes  No      If yes, describe which limited project applies to this project. (See 310 CMR 10.24 and 10.53 for a complete list and description of limited project types)

2. Limited Project Type

If the proposed activity is eligible to be treated as an Ecological Restoration Limited Project (310 CMR 10.24(8), 310 CMR 10.53(4)), complete and attach Appendix A: Ecological Restoration Limited Project Checklist and Signed Certification.

8. Property recorded at the Registry of Deeds for:

Worcester

a. County

30935

c. Book

b. Certificate # (if registered land)

342

d. Page Number

### B. Buffer Zone & Resource Area Impacts (temporary & permanent)

- Buffer Zone Only – Check if the project is located only in the Buffer Zone of a Bordering Vegetated Wetland, Inland Bank, or Coastal Resource Area.
- Inland Resource Areas (see 310 CMR 10.54-10.58; if not applicable, go to Section B.3, Coastal 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.



**Massachusetts Department of Environmental Protection**  
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**WPA Form 3 – Notice of Intent**

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**B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)**

For all projects affecting other Resource Areas, please attach a narrative explaining how the resource area was delineated.

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Bank	1. linear feet	2. linear feet
b. <input type="checkbox"/> Bordering Vegetated Wetland	1. square feet	2. square feet
c. <input type="checkbox"/> Land Under Waterbodies and Waterways	1. square feet 3. cubic yards dredged	2. square feet

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet 3. cubic feet of flood storage lost	2. square feet 4. cubic feet replaced
e. <input type="checkbox"/> Isolated Land Subject to Flooding	1. square feet 2. cubic feet of flood storage lost	3. cubic feet replaced

- f.  Riverfront Area
1. Name of Waterway (if available) - **specify coastal or inland**
2. Width of Riverfront Area (check one):
- 25 ft. - Designated Densely Developed Areas only
  - 100 ft. - New agricultural projects only
  - 200 ft. - All other projects

3. Total area of Riverfront Area on the site of the proposed project: \_\_\_\_\_ square feet

4. Proposed alteration of the Riverfront Area:

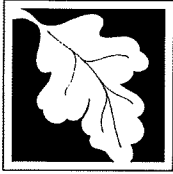
a. total square feet \_\_\_\_\_ b. square feet within 100 ft. \_\_\_\_\_ c. square feet between 100 ft. and 200 ft. \_\_\_\_\_

5. Has an alternatives analysis been done and is it attached to this NOI?  Yes  No

6. Was the lot where the activity is proposed created prior to August 1, 1996?  Yes  No

3.  Coastal Resource Areas: (See 310 CMR 10.25-10.35)

**Note:** for coastal riverfront areas, please complete **Section B.2.f.** above.



**Massachusetts Department of Environmental Protection**  
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**B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)**

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.

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

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Designated Port Areas	Indicate size under Land Under the Ocean, below	
b. <input type="checkbox"/> Land Under the Ocean	1. square feet _____	
	2. cubic yards dredged _____	
c. <input type="checkbox"/> Barrier Beach	Indicate size under Coastal Beaches and/or Coastal Dunes below	
d. <input type="checkbox"/> Coastal Beaches	1. square feet _____	2. cubic yards beach nourishment _____
e. <input type="checkbox"/> Coastal Dunes	1. square feet _____	2. cubic yards dune nourishment _____
	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
f. <input type="checkbox"/> Coastal Banks	1. linear feet _____	
g. <input type="checkbox"/> Rocky Intertidal Shores	1. square feet _____	
h. <input type="checkbox"/> Salt Marshes	1. square feet _____	2. sq ft restoration, rehab., creation _____
i. <input type="checkbox"/> Land Under Salt Ponds	1. square feet _____	
	2. cubic yards dredged _____	
j. <input type="checkbox"/> Land Containing Shellfish	1. square feet _____	
k. <input type="checkbox"/> Fish Runs	Indicate size under Coastal Banks, inland Bank, Land Under the Ocean, and/or inland Land Under Waterbodies and Waterways, above	
	1. cubic yards dredged _____	
l. <input type="checkbox"/> Land Subject to Coastal Storm Flowage	1. square feet _____	
4. <input type="checkbox"/> Restoration/Enhancement	If the project is for the purpose of restoring or enhancing a wetland resource area in addition to the square footage that has been entered in Section B.2.b or B.3.h above, please enter the additional amount here.	
	a. square feet of BVW _____	b. square feet of Salt Marsh _____
5. <input type="checkbox"/> Project Involves Stream Crossings		
	a. number of new stream crossings _____	b. number of replacement stream crossings _____



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## C. Other Applicable Standards and Requirements

- This is a proposal for an Ecological Restoration Limited Project. Skip Section C and complete Appendix A: Ecological Restoration Limited Project Checklists – Required Actions (310 CMR 10.11).

### Streamlined Massachusetts Endangered Species Act/Wetlands Protection Act Review

1. Is any portion of the proposed project located in **Estimated Habitat of Rare Wildlife** as indicated on the most recent Estimated Habitat Map of State-Listed Rare Wetland Wildlife published by the Natural Heritage and Endangered Species Program (NHESP)? To view habitat maps, see the *Massachusetts Natural Heritage Atlas* or go to [http://maps.massgis.state.ma.us/PRI\\_EST\\_HAB/viewer.htm](http://maps.massgis.state.ma.us/PRI_EST_HAB/viewer.htm).

- a.  Yes     No    **If yes, include proof of mailing or hand delivery of NOI to:**

Natural Heritage and Endangered Species Program  
 Division of Fisheries and Wildlife  
 1 Rabbit Hill Road  
 Westborough, MA 01581

MassGIS \_\_\_\_\_  
 b. Date of map

If yes, the project is also subject to Massachusetts Endangered Species Act (MESA) review (321 CMR 10.18). To qualify for a streamlined, 30-day, MESA/Wetlands Protection Act review, please complete Section C.1.c, and include requested materials with this Notice of Intent (NOI); OR complete Section C.2.f, if applicable. *If MESA supplemental information is not included with the NOI, by completing Section 1 of this form, the NHESP will require a separate MESA filing which may take up to 90 days to review (unless noted exceptions in Section 2 apply, see below).*

- c. Submit Supplemental Information for Endangered Species Review\*
  1.  Percentage/acreage of property to be altered:
 

(a) within wetland Resource Area	
percentage/acreage	
(b) outside Resource Area	
percentage/acreage	
  2.  Assessor's Map or right-of-way plan of site
2.  Project plans for entire project site, including wetland resource areas and areas outside of wetlands jurisdiction, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work \*\*
  - (a)  Project description (including description of impacts outside of wetland resource area & buffer zone)
  - (b)  Photographs representative of the site

\* Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review (see <http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/>). Priority Habitat includes habitat for state-listed plants and strictly upland species not protected by the Wetlands Protection Act.

\*\* MESA projects may not be segmented (321 CMR 10.16). The applicant must disclose full development plans even if such plans are not required as part of the Notice of Intent process.



Massachusetts Department of Environmental Protection  
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**C. Other Applicable Standards and Requirements (cont'd)**

- (c)  MESA filing fee (fee information available at [http://www.mass.gov/dfwele/dfw/nhosp/regulatory\\_review/mesa/mesa\\_fee\\_schedule.htm](http://www.mass.gov/dfwele/dfw/nhosp/regulatory_review/mesa/mesa_fee_schedule.htm)). Make check payable to "Commonwealth of Massachusetts - NHESP" and **mail to NHESP** at above address

*Projects altering 10 or more acres of land, also submit:*

- (d)  Vegetation cover type map of site
- (e)  Project plans showing Priority & Estimated Habitat boundaries
- (f) OR Check One of the Following
1.  Project is exempt from MESA review.  
Attach applicant letter indicating which MESA exemption applies. (See 321 CMR 10.14, [http://www.mass.gov/dfwele/dfw/nhosp/regulatory\\_review/mesa/mesa\\_exemptions.htm](http://www.mass.gov/dfwele/dfw/nhosp/regulatory_review/mesa/mesa_exemptions.htm); the NOI must still be sent to NHESP if the project is within estimated habitat pursuant to 310 CMR 10.37 and 10.59.)
2.  Separate MESA review ongoing. a. NHESP Tracking # \_\_\_\_\_ b. Date submitted to NHESP \_\_\_\_\_
3.  Separate MESA review completed.  
Include copy of NHESP "no Take" determination or valid Conservation & Management Permit with approved plan.
3. For coastal projects only, is any portion of the proposed project located below the mean high water line or in a fish run?
- a.  Not applicable – project is in inland resource area only      b.  Yes     No

If yes, include proof of mailing, hand delivery, or electronic delivery of NOI to either:

South Shore - Cohasset to Rhode Island border, and the Cape & Islands:

Division of Marine Fisheries -  
Southeast Marine Fisheries Station  
Attn: Environmental Reviewer  
836 South Rodney French Blvd.  
New Bedford, MA 02744  
Email: [DMF.EnvReview-South@state.ma.us](mailto:DMF.EnvReview-South@state.ma.us)

North Shore - Hull to New Hampshire border:

Division of Marine Fisheries -  
North Shore Office  
Attn: Environmental Reviewer  
30 Emerson Avenue  
Gloucester, MA 01930  
Email: [DMF.EnvReview-North@state.ma.us](mailto:DMF.EnvReview-North@state.ma.us)

Also if yes, the project may require a Chapter 91 license. For coastal towns in the Northeast Region, please contact MassDEP's Boston Office. For coastal towns in the Southeast Region, please contact MassDEP's Southeast Regional Office.



**Massachusetts Department of Environmental Protection**  
Bureau of Resource Protection - Wetlands

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## WPA Form 3 – Notice of Intent

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

### C. Other Applicable Standards and Requirements (cont'd)

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

4. 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 MassDEP Website for ACEC locations). **Note:** electronic filers click on Website.
- b. ACEC \_\_\_\_\_
5. Is any portion of the proposed project within an area designated as an Outstanding Resource Water (ORW) as designated in the Massachusetts Surface Water Quality Standards, 314 CMR 4.00?
- a.  Yes  No
6. 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
7. Is this project subject to provisions of the MassDEP Stormwater Management Standards?
- a.  Yes. Attach a copy of the Stormwater Report as required by the Stormwater Management Standards per 310 CMR 10.05(6)(k)-(q) and check if:
1.  Applying for Low Impact Development (LID) site design credits (as described in Stormwater Management Handbook Vol. 2, Chapter 3)
  2.  A portion of the site constitutes redevelopment
  3.  Proprietary BMPs are included in the Stormwater Management System.
- b.  No. Check why the project is exempt:
1.  Single-family house
  2.  Emergency road repair
  3.  Small Residential Subdivision (less than or equal to 4 single-family houses or less than or equal to 4 units in multi-family housing project) with no discharge to Critical Areas.

### D. Additional Information

- This is a proposal for an Ecological Restoration Limited Project. Skip Section D and complete Appendix A: Ecological Restoration Notice of Intent – Minimum Required Documents (310 CMR 10.12).

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.

1.  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.)
2.  Plans identifying the location of proposed activities (including activities proposed to serve as a Bordering Vegetated Wetland [BVW] replication area or other mitigating measure) relative to the boundaries of each affected resource area.



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

# WPA Form 3 – Notice of Intent

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Provided by MassDEP:

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## D. Additional Information (cont'd)

3.  Identify the method for BVW and other resource area boundary delineations (MassDEP BVW Field Data Form(s), Determination of Applicability, Order of Resource Area Delineation, etc.), and attach documentation of the methodology.

4.  List the titles and dates for all plans and other materials submitted with this NOI.

Septic System Upgrade & NOI Plan

a. Plan Title

GRAZ Engineering, LLC

b. Prepared By

Paul F. Grasewicz

c. Signed and Stamped by

6/29/22

1"=20'

d. Final Revision Date

e. Scale

f. Additional Plan or Document Title

g. Date

5.  If there is more than one property owner, please attach a list of these property owners not listed on this form.

6.  Attach proof of mailing for Natural Heritage and Endangered Species Program, if needed.

7.  Attach proof of mailing for Massachusetts Division of Marine Fisheries, if needed.

8.  Attach NOI Wetland Fee Transmittal Form

9.  Attach Stormwater Report, if needed.

## E. Fees

1.  Fee Exempt: No filing fee shall be assessed for projects of any city, town, county, or district of the Commonwealth, federally recognized Indian tribe housing authority, municipal housing authority, or the Massachusetts Bay Transportation Authority.

Applicants must submit the following information (in addition to pages 1 and 2 of the NOI Wetland Fee Transmittal Form) to confirm fee payment:

5085

2. Municipal Check Number

6/28/22

3. Check date

5086

4. State Check Number

6/28/22

5. Check date

Paul

6. Payor name on check: First Name

Grasewicz

7. Payor name on check: Last Name



**Massachusetts Department of Environmental Protection**  
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**WPA Form 3 – Notice of Intent**  
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

Provided by MassDEP:

\_\_\_\_\_  
 MassDEP File Number  
 \_\_\_\_\_  
 Document Transaction Number  
 Winchendon  
 \_\_\_\_\_  
 City/Town

**F. 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 by Certificate of Mailing or 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.

Chris Kupsonides  
 1. Signature of Applicant

6/29/22  
 2. Date

3. Signature of Property Owner (if different)

4. Date

[Signature]  
 5. Signature of Representative (if any)

6/29/22  
 6. Date

**For Conservation Commission:**

Two copies of the completed Notice of Intent (Form 3), including supporting plans and documents, two copies of the NOI Wetland Fee Transmittal Form, and the city/town fee payment, to the Conservation Commission by certified mail or hand delivery.

**For MassDEP:**

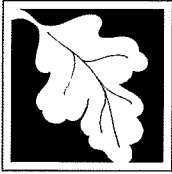
One copy of the completed Notice of Intent (Form 3), including supporting plans and documents, one copy of the NOI Wetland Fee Transmittal Form, and a **copy** of the state fee payment to the MassDEP Regional Office (see Instructions) by certified mail or hand delivery.

**Other:**

If the applicant has checked the "yes" box in any part of Section C, 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.





**Massachusetts Department of Environmental Protection**  
 Bureau of Resource Protection - Wetlands  
**NOI Wetland Fee Transmittal Form**  
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

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



**A. Applicant Information**

1. Location of Project:

770 River Street Winchendon  
 a. Street Address b. City/Town  
 5086 \$42.50  
 c. Check number d. Fee amount

2. Applicant Mailing Address:

Chris Kapsimalis  
 a. First Name b. Last Name  
 c. Organization  
 25 Pinewood Road  
 d. Mailing Address  
 Bolton MA 01740  
 e. City/Town f. State g. Zip Code  
 h. Phone Number i. Fax Number  
 j. Email Address chris.kapsimalis87@gmail.com

3. Property Owner (if different):

Julie Horman (Deceased)  
 a. First Name b. Last Name  
 c. Organization  
 770 River Street  
 d. Mailing Address  
 Winchendon MA 01475  
 e. City/Town f. State g. Zip Code  
 h. Phone Number i. Fax Number  
 j. Email Address

**B. Fees**

Fee should be calculated using the following process & worksheet. **Please see Instructions before filling out worksheet.**

**Step 1/Type of Activity:** Describe each type of activity that will occur in wetland resource area and buffer zone.

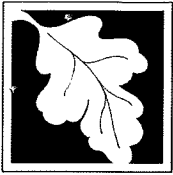
**Step 2/Number of Activities:** Identify the number of each type of activity.

**Step 3/Individual Activity Fee:** Identify each activity fee from the six project categories listed in the instructions.

**Step 4/Subtotal Activity Fee:** Multiply the number of activities (identified in Step 2) times the fee per category (identified in Step 3) to reach a subtotal fee amount. Note: If any of these activities are in a Riverfront Area in addition to another Resource Area or the Buffer Zone, the fee per activity should be multiplied by 1.5 and then added to the subtotal amount.

**Step 5/Total Project Fee:** Determine the total project fee by adding the subtotal amounts from Step 4.

**Step 6/Fee Payments:** To calculate the state share of the fee, divide the total fee in half and subtract \$12.50. To calculate the city/town share of the fee, divide the total fee in half and add \$12.50.



Massachusetts Department of Environmental Protection  
 Bureau of Resource Protection - Wetlands  
**NOI Wetland Fee Transmittal Form**  
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

**B. Fees (continued)**

Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
Work on a septic system	1	\$110.00	\$110.00
Local Bylaw	1	\$75.00	

**Step 5/Total Project Fee:** \$185.00

**Step 6/Fee Payments:**

Total Project Fee:	\$185.00
State share of filing Fee:	\$42.50
City/Town share of filling Fee:	\$142.50
	a. Total Fee from Step 5
	b. 1/2 Total Fee less \$12.50
	c. 1/2 Total Fee plus \$12.50

**C. Submittal Requirements**

- a.) Complete pages 1 and 2 and send with a check or money order for the state share of the fee, payable to the Commonwealth of Massachusetts.

Department of Environmental Protection  
 Box 4062  
 Boston, MA 02211

- b.) **To the Conservation Commission:** Send the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and the city/town fee payment.

**To MassDEP Regional Office (see Instructions):** Send a copy of the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and a copy of the state fee payment. (E-filers of Notices of Intent may submit these electronically.)

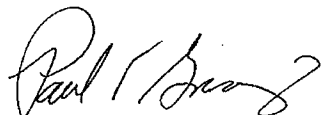
AFFIDAVIT OF SERVICE

Under the Massachusetts Wetlands Protection Act

(to be submitted to the Massachusetts Department of  
Environmental Protection and the Conservation Commission  
when filing a Notice of Intent)

I, Paul F. Grasewicz, hereby certify under the pains and penalties of perjury that on June 30, 2022 I gave notification to abutters in compliance with the second paragraph of Massachusetts General Laws Chapter 131, Section 40, and the DEP Guide to Abutter Notification dated April 8, 1994, in connection with the following matter:

A Notice of Intent filed under the Massachusetts Wetlands Protection Act by Asher Construction, LLC with the Winchendon Conservation Commission on June 30, 2022 for property located at 770 River Street (Map-4 Lot-136) Winchendon, MA. The form of the notification, and a list of the abutters to whom it was given are attached to this Affidavit of Service.



\_\_\_\_\_  
Name

June 30, 2022

\_\_\_\_\_  
Date



# 100 foot Abutters List Report

Winchendon, MA  
June 29, 2022

## Subject Property:

Parcel Number: 4-0-136  
CAMA Number: 4-0-136  
Property Address: 770 RIVER ST

Mailing Address: HORMAN JULIE A HORMAN S DEAN  
38 OLD MARLBORO RD  
MAYNARD, MA 01754

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## Abutters:

Parcel Number: 4-0-135  
CAMA Number: 4-0-135  
Property Address: 760 RIVER ST

Mailing Address: LEBLANC, ROGER O.  
760 RIVER STREET  
WINCHENDON, MA 01475

Parcel Number: 4-0-137  
CAMA Number: 4-0-137  
Property Address: 780 RIVER ST

Mailing Address: LAMPI, DAVID W. LOZEAU, SHANNON A.  
780 RIVER STREET  
WINCHENDON, MA 01475

Parcel Number: 4-0-169  
CAMA Number: 4-0-169  
Property Address: 761 RIVER ST

Mailing Address: MCNEIL, SEAN P.  
761 RIVER STREET  
WINCHENDON, MA 01475

Parcel Number: 4-0-172  
CAMA Number: 4-0-172  
Property Address: 751 RIVER ST

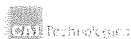
Mailing Address: GIOVANNUCCI MICHAEL HASLAM-  
GIOVANNUCCI CHRISTINE  
751 RIVER ST  
WINCHENDON, MA 01475

Parcel Number: 4-0-4  
CAMA Number: 4-0-4  
Property Address: RIVER ST

Mailing Address: COMMONWEALTH OF  
MASSACHUSETTS DEPARTMENT OF  
FISH AND GAME  
251 CAUSEWAY ST SUITE 400  
BOSTON, MA 02114

Parcel Number: 4-0-79  
CAMA Number: 4-0-79  
Property Address: RIVER ST

Mailing Address: LEBLANC, ROGER O. LEBLANC, JOYCE  
M.  
760 RIVER STREET  
WINCHENDON, MA 01475

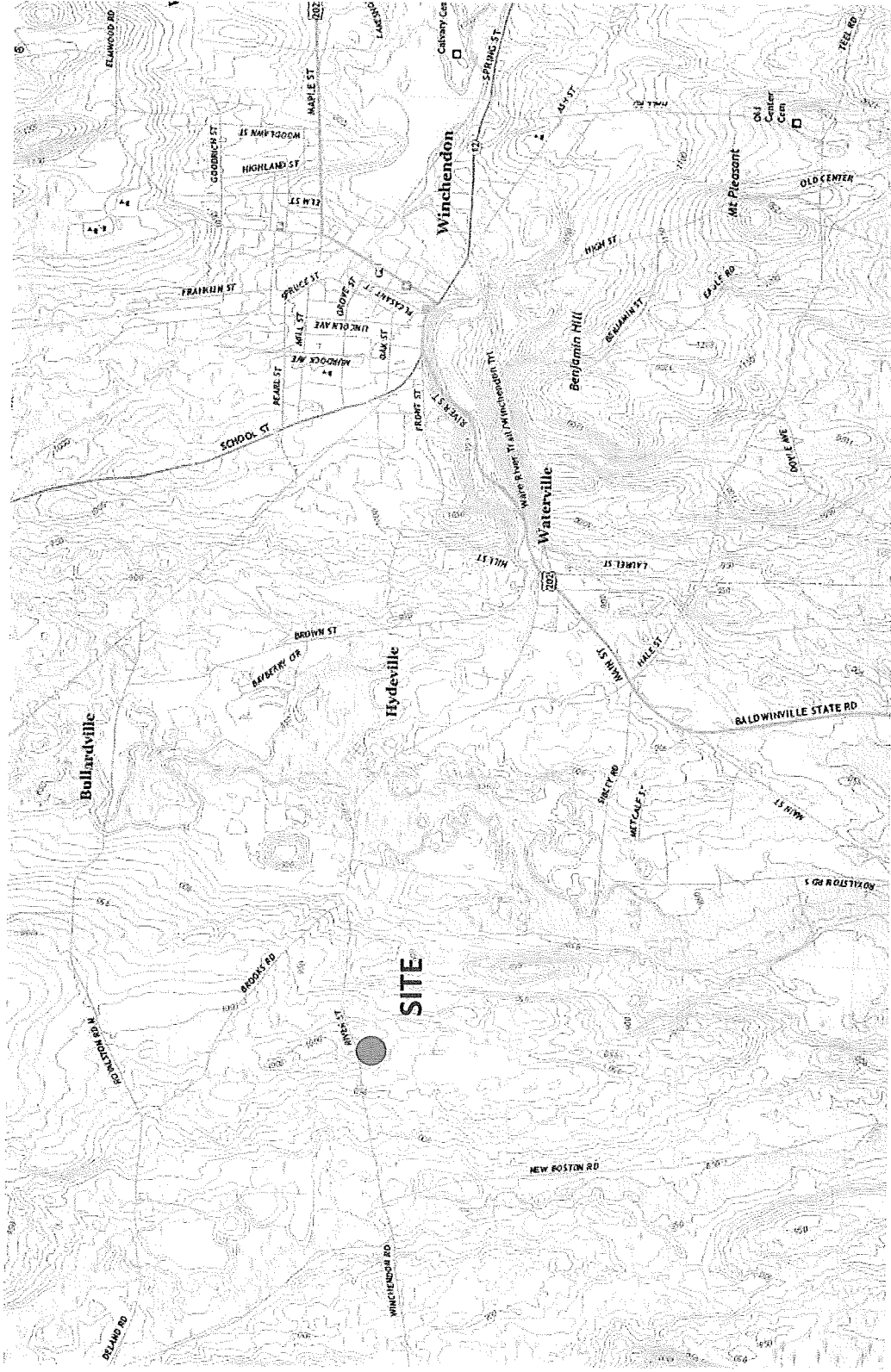


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6/29/2022

Page 1 of 1



USGS Map

Notification to Abutters Under the  
Massachusetts Wetlands Protection Act

In accordance with the second paragraph Massachusetts General Laws Chapter 131, Section 40, you are hereby notified of the following.

- A. The name of the applicant is Chris Kapsimalis.
- B. The applicant has filed a Notice of Intent with the Conservation Commission for the municipality of Winchendon seeking permission to remove, fill, dredge or alter an Area Subject to Protection under the Wetlands Protection Act (General Laws Chapter 131, Section 40). Specifically, the construction of a septic system partially within the 50' buffer of a wetland to serve an existing dwelling (770 River Street).
- C. The address of the lot where the activity is proposed is 770 River Street; Winchendon, MA (Map-4 Lot-136).
- D. Copies of the Notice of Intent may be examined at GRAZ Engineering LLC, 323 West Lake Road, Fitzwilliam, NH 03447 between the hours of 8am and 4 pm Monday through Friday by appointment only. For copies call 603-585-6959.
- E. Information regarding the date, time, and place of the public hearing may be obtained from the Winchendon Conservation Commission by checking the town website's meeting/agenda list or by calling Matthew Marro at 978-314-7858.
- F. Notice of public hearing, including date, time, and place, will be published in the newspaper at least 5 days in advance of the hearing.

Note: Notice of the public hearing, including its date, time, and location will be posted in the city or town hall not less than forty-eight hours in advance of hearing. At this time, the hearing is planned for July 14, 2022, at 6:00 P.M. Please verify if interested.

Note: You may also contact your local Conservation Commission or the nearest Department of Environmental Protection Regional Office for more information about this application or the Wetlands Protection Act. To contact DEP, call:

Central Region:508-792-7650

Northeast Region:617-654-6500

Southeast Region:508-946-2700

Western Region:413-784-1100



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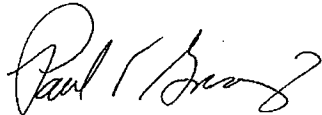
AFFIDAVIT OF SERVICE

Under the Massachusetts Wetlands Protection Act

(to be submitted to the Massachusetts Department of  
Environmental Protection and the Conservation Commission  
when filing a Notice of Intent)

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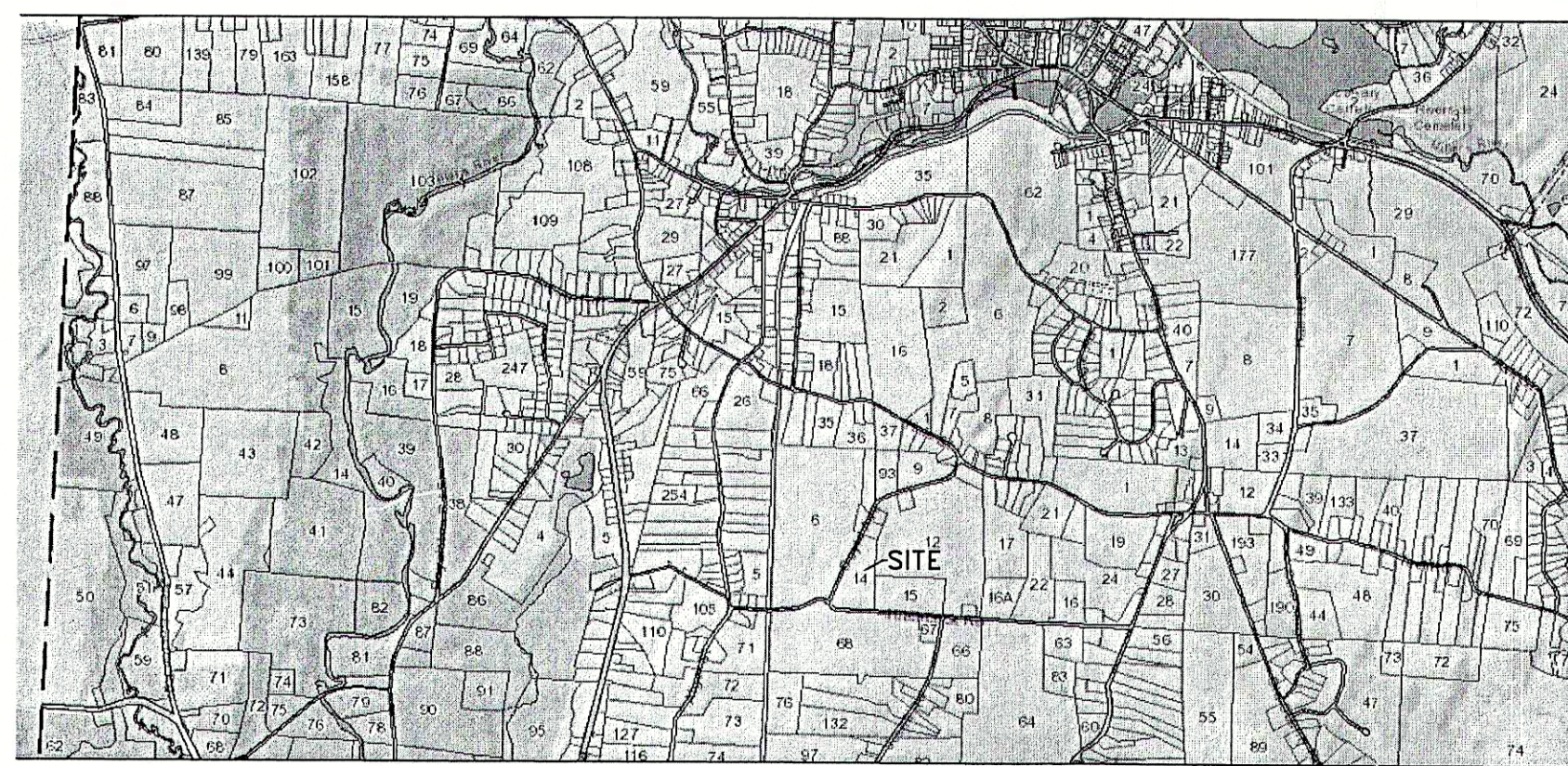


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Name

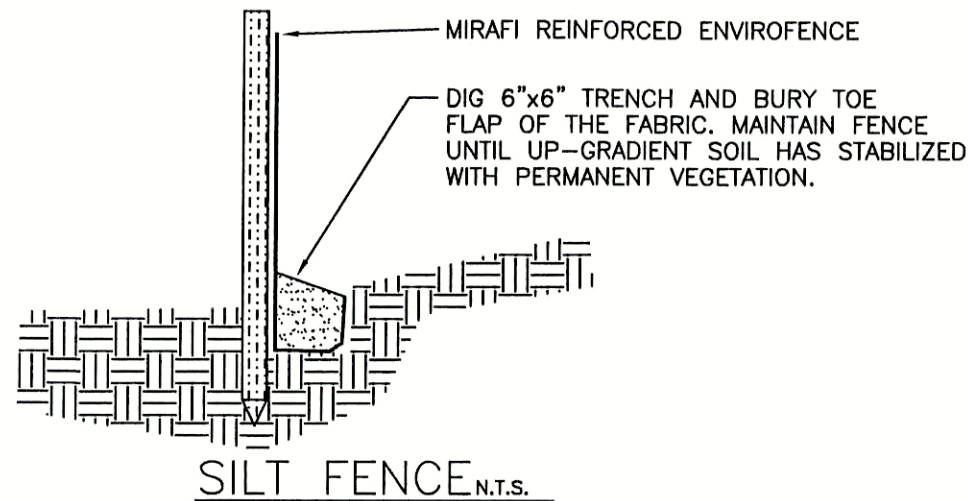
June 30, 2022

\_\_\_\_\_  
Date





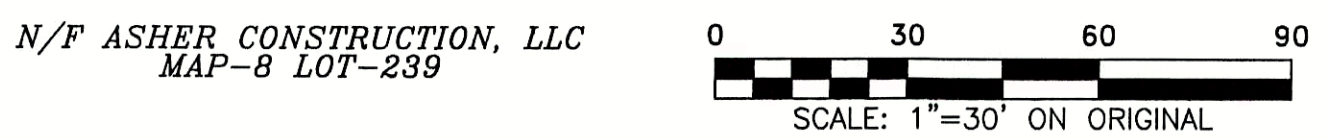
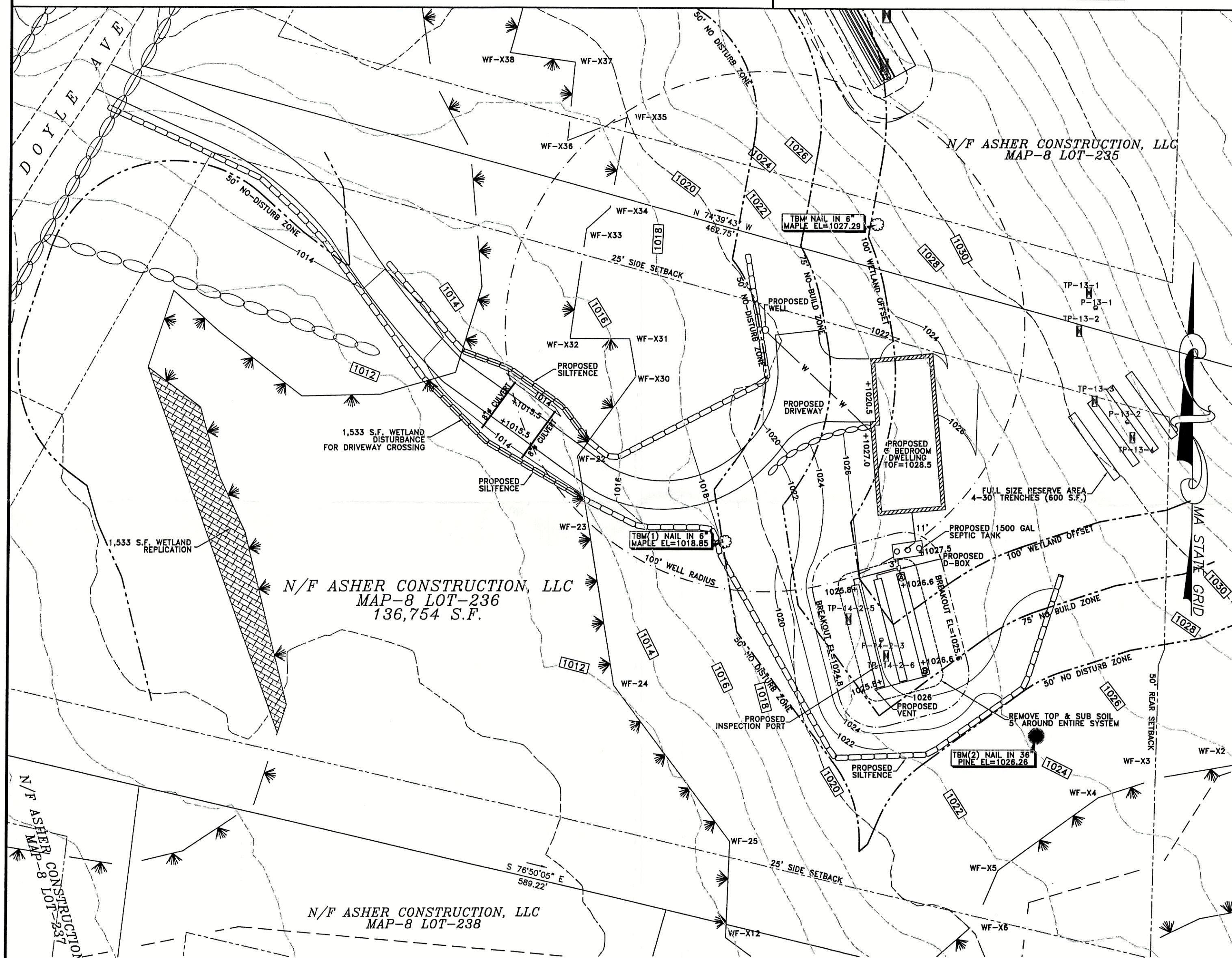
LOCUS NTS



SILT FENCE N.T.S.

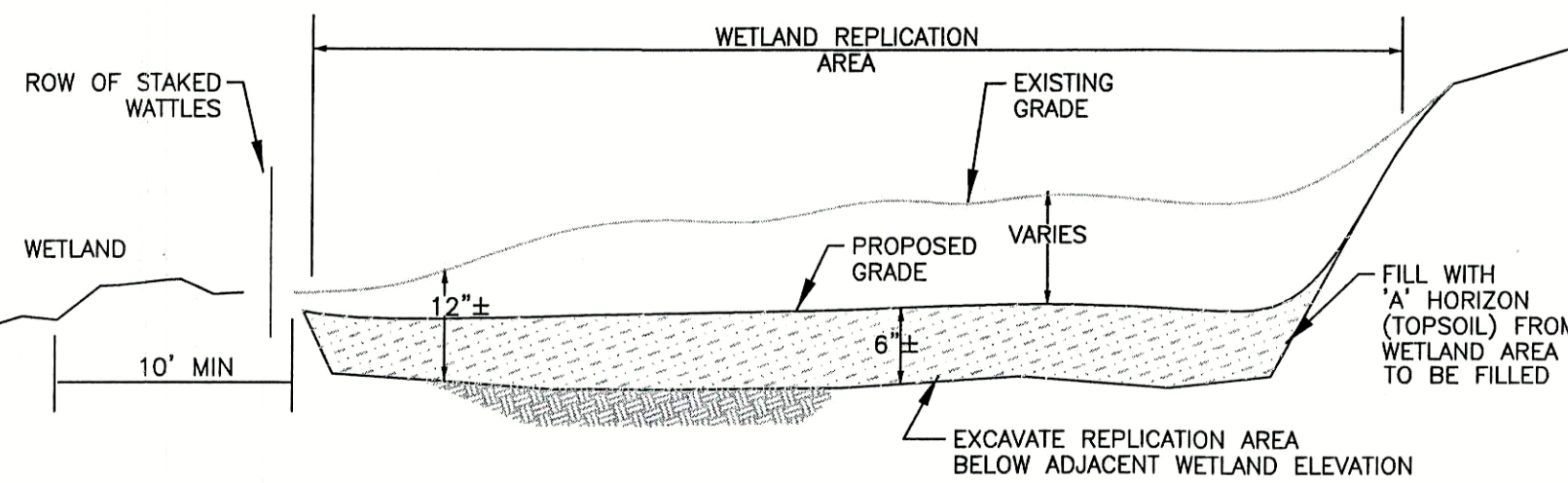
PROPOSED SEPTIC TIES

CL-TRENCH-A	TBM(1)	TBM(2)
CL-TRENCH-B	68.8'	81.5'
CL-TRENCH-C	92.8'	48.5'

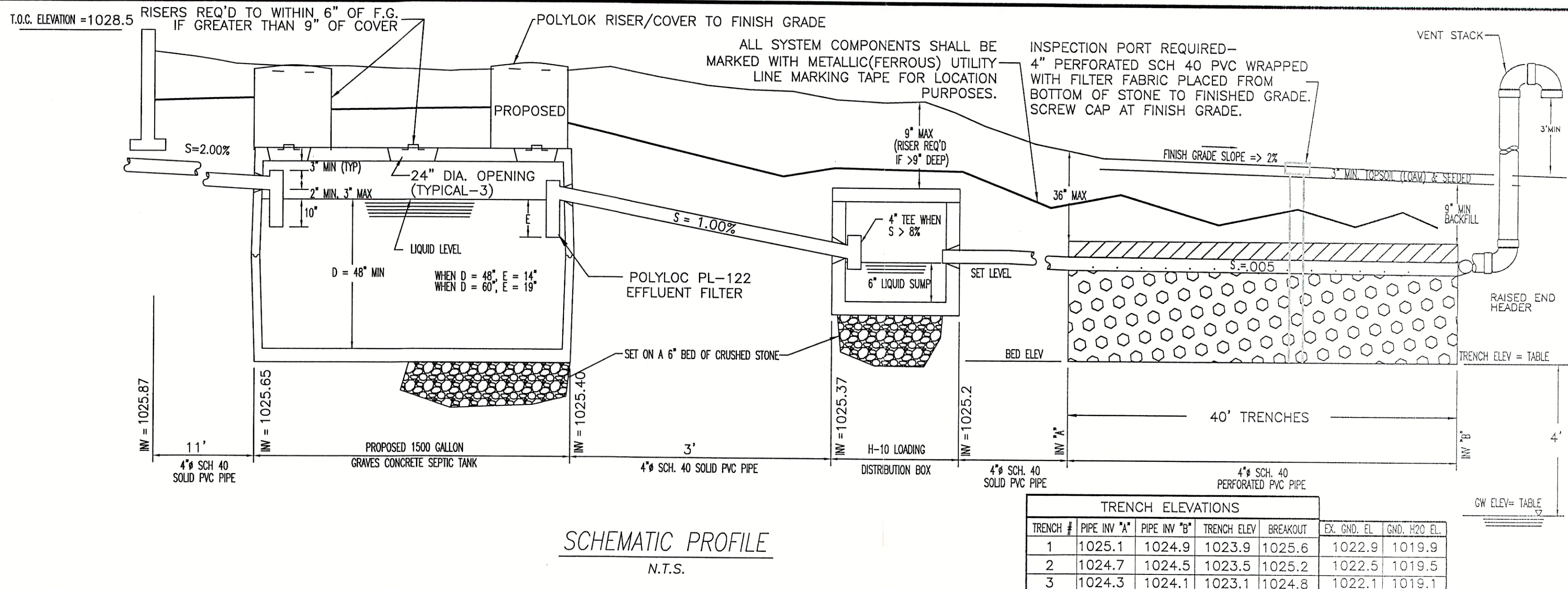


WETLAND REPLICATION NOTES

- INSTALL STRAW WATTLES IMMEDIATELY BEYOND THE DISTURBED AREA AS SHOWN ON THE PLAN.
- LOWER THE GRADE IN THE REPLICATION AREA 12"± BELOW ADJACENT WETLAND ELEVATION. CONTACT ENGINEER/WETLAND SCIENTIST PRIOR TO CUTTING ANY TREES AND AFTER THE DESIRED CUT DEPTH HAS BEEN ACHIEVED IN THE DESIGNATED WETLAND REPLACEMENT AREA (FOR INSPECTION). MATURE TREES SHALL BE PRESERVED WHERE POSSIBLE. THE AREA SHALL BE ADJACENT TO AND HYDRAULICALLY CONNECTED TO, BUT SHALL NOT ALTER THE EXISTING WETLAND.
- 6"± OF NEW ORGANIC RICH TOPSOIL SHALL BE PLACED IN THE PREPARED AREA. TOPSOIL SHOULD BE OBTAINED PREFERABLY FROM THE PROPOSED CROSSING. IF ADDITIONAL SOIL IS NEEDED, TOPSOIL FROM AN AUTHORIZED LOCAL WETLAND DREDGING MAY BE USED. FOR ADDITIONAL DETAILS, SEE MASSDEP REPLICATION GUIDELINES (REV. 2002) SECTION 2.3.2.
- PLANTS IN THE DISTURBED WETLAND AREA SHALL BE RELOCATED TO THE WETLAND REPLICATION AREA. FOR DETAILS CONCERNING THE RELOCATION OF VEGETATION, SEE MASSDEP REPLICATION GUIDELINES (REV. MARCH 2002) SECTION 2.3.3. IF THE RELOCATED VEGETATION DOES NOT PROVIDE 75% OF SURFACE COVERAGE, CONTACT THE ENGINEER FOR INSTRUCTIONS ON ADDITIONAL PLANTINGS.
- KEEP AREA WET/DAMP FOR APPROXIMATELY 1 MONTH IMMEDIATELY AFTER PLANTING. AFTER FIRST MONTH, MONITOR AREA FREQUENTLY AND ADD WATER AS NECESSARY.
- INSPECT AT DIFFERENT PERIODS OF CONSTRUCTION AND POST CONSTRUCTION PER MASSDEP REPLICATION GUIDELINES (REV. 2002) SECTION 4.0 AND EXAMPLE MONITORING DATA SHEET INCLUDED AS APPENDIX 4 IN SAID REPLICATION GUIDELINES. ANY CORRECTIVE ACTIONS NECESSARY SHALL BE OUTLINED IN THE ANNUAL REPORTS.

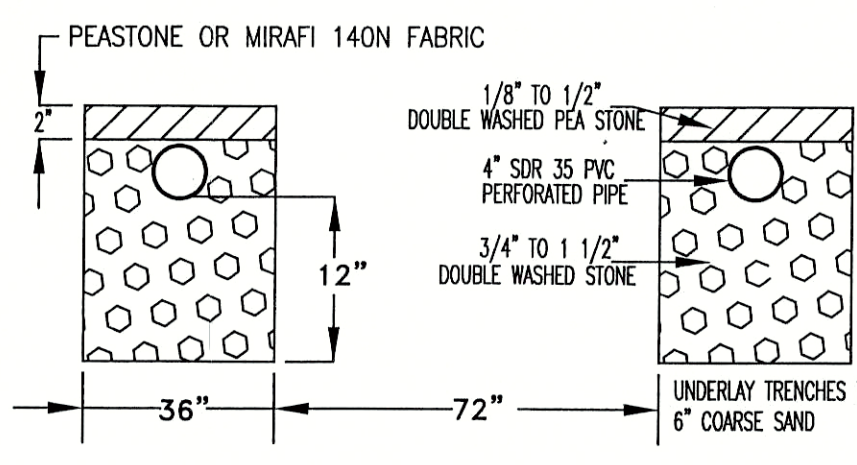


WETLAND REPLICATION DETAIL N.T.S.



SCHEMATIC PROFILE N.T.S.

TRENCH ELEVATIONS						
TRENCH #	PIPE INV. A'	PIPE INV. B'	TRENCH ELEV.	BREAKOUT	EX. GND. EL.	GND. H2O EL.
1	1025.1	1024.9	1023.9	1025.6	1022.9	1019.9
2	1024.7	1024.5	1023.5	1025.2	1022.5	1019.5
3	1024.3	1024.1	1023.1	1024.8	1022.1	1019.1



TYPICAL LEACH TRENCH SECTION N.T.S.

DESIGN CRITERIA

- Estimated Hydraulic Loading  
3 bedrooms at 110 gals/day/bedroom = 330 gpd  
Garbage disposal shall not be allowed with this system.
- Septic tank size = 1500 gallons.
- Leaching Area Design Criteria  
Percolation Rate = 13 mpi  
Soil Class Type = II (SANDY LOAM)  
Allowable Loading Rate = 0.56 gpd/sf  
Required Leaching Area = 330 gpd / 0.56 gpd/sf = 590 sf (Title V)  
Leaching Area Provided = 3 trenches X 40 ft trench length X 5 sf/ft = 600 sf
- Breakout (BO)  
Breakout Elevation = VARIES (SEE TABLE)  
Breakout Distance = 15 ft  
Distance Provided = 15 ft.

LEGEND

- 242 EXISTING CONTOUR
- 242 PROPOSED CONTOUR
- TP-1 DEEP HOLE TEST PIT
- PH-1 PERCOLATION TEST
- + 238.6 PROPOSED SPOT ELEVATION

GENERAL NOTES

- Unless otherwise noted, property lines shown are compiled from existing plans and deeds of record. Proposed buildings and septic system should be located by instrument survey prior to construction.
- All construction to conform to 310 CMR 15.000, "The State Environmental Code, Title 5" and the Board of Health requirements for the Town of WINCHENDON.
- The contractor shall install the system exactly as shown on this plan. If changes are necessary, the contractor must contact the Engineer in advance.
- Heavy machinery shall not be permitted to pass over the leaching area and the contractor shall stake and flag the soil absorption/leaching area perimeter upon completion.
- All piping shall be polyvinyl chloride (PVC) pipe per ASTM D1785 for sch.40 and ASTM D3034 for SDR35 where indicated on the profile, unless otherwise noted.
- The septic tank shall be a Graves Concrete H-10 1500 gallon monolithic tank.
- The distribution box (D-box) shall be a 5 outlet reinforced concrete box of H-10 load design (min.) with a watertight cover and conform to all the requirements of 310 CMR 15.232.
- All topsoil, subsoil and impervious material, if any, must be excavated and removed below and 5' beyond the soil absorption system area. Fill material shall consist of a clean granular sand, free from organic matter and deleterious substances. Mixtures and layers of different classes of soil not be used. The sand fill shall not contain any material larger than 2 inches. A sieve analysis, using a #4 sieve, shall be performed on a representative sample of the fill. Up to 45% by weight of the fill sample may be retained on the #4 sieve. Sieve analyses also shall be performed on the fraction of the fill sample passing the #4 sieve, such analyses must demonstrate that the material meets or exceeds each of the following specifications: 100% passing #4 sieve; 10%-100% passing #50 sieve; 0%-20% passing #100 sieve; 0%-5% passing #200 sieve. (11/95 DEP SPEC)
- For proper performance, septic tank should be inspected at least once a year and pumped when the top of the sludge or solids layer is within 12" or less of the bottom of the outlet tee or the bottom of the scum layer is within 2 inches of the bottom of outlet tee (every 2 or 3 years). INSPECT & CLEAN THE TANK OUTLET FILTER EVERY YEAR!
- There are no other wells located within 150 feet of the proposed system.

SOIL TEST DATA

DEEP HOLE & PERC TESTS  
PERFORMED BY: TREVOR FLETCHER, S.E.  
WITNESSED BY: JIM ABARE & STEVE CALICHMAN  
DATE: MARCH 7, 2022

PERC TEST NUMBER	DEPTH	PERC RATE	NOTES
PERC-13-1	42"	13 MPI	
PERC-13-2	40"	12 MPI	
PERC-14-2-3	36"	11 MPI	

\*TESTING ON LOT INITIALLY CONDUCTED AS 'LOT-13'

NO.	DESCRIPTION	DATE	BY

DESIGNED BY TWF  
DRAWN BY TWF  
CHECKED BY PFG  
DATE 6/27/22  
SCALE 1"=30'  
JOB NUMBER 21183

PROPOSED SINGLE FAMILY RESIDENCE SEPTIC DESIGN & NOI PLAN  
MAP-8 LOT-236  
DOYLE AVE; WINCHENDON, MA  
PREPARED FOR:  
ASHER CONSTRUCTION, LLC  
77 NASHUA ROAD  
SHARON, NH 03458

GRAZ Engineering, LLC  
323 WEST LAKE RD.; FITZ WILLIAM, NH 03447; (603) 585-6959

SHEET 1 OF 1