Boxford Conservation Commission Application Checklist-Notice of Intent (NOI)

This checklist is designed to assist the applicant in preparing a complete Notice of Intent application. One completed copy of the checklist should be submitted with the application. One (1) original and (7) copies of the NOI forms, plans and appurtenant data listed below are required to be submitted for a complete application

The following are required as part of a complete NOI application and are attached:

⊠ Attached	Completed Notice of Intent form (available from the Conservation Office or at http://www.mass.gov/dep/appkits/wpaform3.pdf). (Note: A copy of a complete NOI must also be mailed to the MassDEP NERO, 205B Lowell Street, Wilmington, MA 01887.)
⊠ Attached	Site Plan. See next page for required elements of plan.
⊠ Attached	List of abutters within 250' of the project parcel(s) (and all pond abutters if applicable), prepared and certified by the Town Assessor's Office. (Note: A notice of public hearing will be prepared by the Conservation office and provided to the applicant when the application is submitted. At the public hearing, the applicant must provide evidence that the notice was mailed to each of the persons on the certified abutters list.)
⊠ Attached	A copy of a check made out in the correct amount to the Department of Environmental Protection and a copy of a completed State Wetlands Fee Transmittal Form. (Note: the applicant is responsible for mailing this check along with a completed State Wetlands Fee Transmittal Form to the DEP "Lockbox" at Box 4062, Boston MA 02211.)
⊠ Attached	A check for local filing fees made out in the correct amount to the "Town of Boxford".
☑ Attached □ N/A	Proof of mailing or proof of hand delivery to the Natural Heritage and Endangered Species Program, if applicable.
⊠ Attached □ N/A	Evidence that all other Boxford Bylaw permit applications relevant to the project have been filed, if applicable (e.g., Board of Health, Zoning Board of Appeals). Please list all other Bylaw permit filings: <u>Board of Health.</u>

The following must be shown on the site plan attached to the application:

⊠ Shown	All appropriate plan requirements listed in Section 375-5(A)(1)(b) of the Town of Boxford Wetland Protection Bylaw Regulations.
⊠ Shown	The signature and stamp of a Registered Professional Land Surveyor, Registered Sanitarian, or Registered Professional Engineer, and the identity of the firm/person that delineated the wetland resource area
⊠ Shown	Boundaries of all wetland resource areas (e.g., bordering vegetated wetland, bordering land subject to flooding). All demarcation flags must be located by survey in the field and shown on the plan.
⊠ Shown	All wetland resource area setback lines (e.g., 100' Limit of Jurisdiction, 200' Riverfront, 25' No Disturb, 75' No Build).
⊠ Shown	Existing contour information and proposed grading.
⊠ Shown	Existing site conditions and proposed changes including structures, pavement, landscaping, underground utilities and building overhangs. (Note: it may be necessary to show areas outside of the limits of jurisdictional wetland area in order to provide adequate information for the Commission to properly review the project.)
⊠ Shown	All erosion / sedimentation control measures.
⊠ Shown	Pre- and post-development overstory tree line within jurisdictional area, and a calculation of the percent removal of overstory trees within the "discretionary cutting area" (see Section 375-4(A) and Section 375-98(D)(2) of the Boxford Wetlands Protection Regulations).
	t to the DEP Stormwater Management Policy must include the and supporting documentation must also be mailed to the DEP Northeast d DPW)
☐ Attached	Completed DEP Stormwater Management Form.
□Attached	Stormwater & flood calculations using the Cornell Atlas rainfall estimates, prepared by a Professional Engineer.
☐ Attached	Operations and Maintenance Plan.
□Attached	A stormwater management plan showing stormwater management features highlighted in separate colors, per section 375-5(A)(1)(d) of the Boxford Wetlands Protection Bylaw Regulations.



Commonwealth of Massachusetts City/Town of Boxford **Application for Disposal System Construction Permit**

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Form 1A

DEP has provided this form for use by local Boards of Health if they choose to do so	. Before using
the form, check with your local Board of Health to make sure that they will accept it.	

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





A. Facility Information		
Application is hereby made for a permit	t to: Construct a new on-site sewage Repair or replace an existing on- Repair or replace an existing sys	site sewage disposal system
Location of Facility:		
120 High Ridge Road		
Address or Lot #		
Boxford	MA	01921
City/Town	State	Zip Code
Owner Information		
Joseph Massaro		
Name		
PO Box 263		
Address (if different from above)		
Boxford	MA	01921
City/Town	State	Zip Code
	617-816-8026	
	Telephone Number	
3. Installer Information		
Name	Name of Company	
Address		
City/Town	State	Zip Code
	Telephone Number	
Designer Information	•	
John M. Morin	The Morin-Cam	neron Group, Inc.
John M. Morin Name	Name of Company	
447 Boston Street	Name of Company	
Address		
Topsfield	MA	01983
City/Town	State	Zip Code
	978-887-8586	
	Telephone Numbe	r



Commonwealth of Massachusetts City/Town of Boxford Application for Disposal System Construction Permit

Number		
\$100		
Fee	 	***************************************

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۵.	Facility Information (continued)		*
5.	Type of Building:		
	□ Dwelling		
	Other: Type of Building		Number of Persons Served
	Showers Number of showers	☐ Cafeteria	Other fixtures
	Specify other fixtures:		
6.	Design Flow: Calculated Daily Flow:	autia al aut	sility increased by 50% for
7.	Plan:	9/25/15 Date of Original	•
	Number of Sheets Sanitary Disposal System Repair Plan Title of Plan	Revision Date	
8.	Description of Soil: See plan		
		*-	
9.	Nature of Repairs or Alterations (if applicable):		
10	. Date last inspected:	Data	•



Commonwealth of Massachusetts City/Town of Boxford Application for Disposal System Construction Permit Form 1A

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B.	Aa	ree	me	ent

Agreement	
The undersigned agrees to ensure the construction a sewage disposal system in accordance with the provinct to place the system in operation until a Certificate Health.	visions of Title 5 of the Environmental Code and
Signature	Date
Application Approved By:	
Name	Date
Application Disapproved for the following reasons:	

447 Boston Street; Suite 12 Topsfield, MA 01983 978-887-8586

America's Most Convenient Bank® 53-7054-2113

CHECK DATE

10/7/15

PAY

One hundred & -----00/100 dollars

TO

Town of Boxford

AMOUNT \$100.00

The Morin-Cameron Group, Inc.

603

Massaro 3355 - Septic app. fee

\$100.00

603

APPLICATION FOR VARIANCE BOXFORD BOARD OF HEALTH 7A Spofford Road BOXFORD, MA 01921 978-352-2413

Phone: 617-816-8026 Owner/Agent: Joseph Massaro Mailing Address: PO Box 263, Boxford, MA 01921 Name of establishment: 120 High Ridge Road Property Description (approx. address & Assessor's Map & lot #) 24-4-9.26 Abutters adjacent to and across the street from subject property. (Name & Mailing Address*) SEE ATTACHED * It is the responsibility of the owner/agent to notify abutters regarding this petition by certified mail at least 10 days before the Board of Health Meeting. Failure to notify property abutters may be grounds for denial of the petition. Describe the specific variance requested and the reasons therefore. Supply 4 accurate copies of any plot plans, sewage system designs, or other information necessary for proper review of this application (use back of this form if more space is needed). SEE ATTACHED John M Morin Date: 10/8/15

(as authorized)

LOCAL B.O.H. VARIANCE REQUESTS

	STATE (TITLE 5)	LOCAL (BOH)	REQUEST
MINIMUM SETBACK DISTANCE BETWEEN LEACHING FACILITY AND POTABLE WATER SUPPLY (BOXFORD BOARD OF HEALTH REGULATIONS, CHAPTER 201, SECTION 9(D))	100'	150'	120'
MINIMUM SETBACK DISTANCE BETWEEN LEACHING FACILITY AND WETLAND RESOURCE AREAS (BOXFORD BOARD OF HEALTH REGULATIONS, CHAPTER 201, SECTION 9(E))	50°	150'	100'

TOWN OF BOXFORD
ABUTTER LIST

 BOARD OF HEALTH 500'
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7 2 O					Owner	Owner	Zip
		and the state of t)	Owner Address	City/Town	State	Code
Map/Lot	Location	(0,wner	C DOLLCH A NT	89 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-09-19)	89 HIGH RIDGE RD	BOUSTANI MANSOUR II		OS CEODCETOWN RD	ROXFORD	MA	01921
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(24-04-09-25)	126 FIGH RIDGE RD	DIVENUTI ARTHUR I R	Control of the Contro	193 HICH PINCE RD	ROXFORD	MA	01921
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(7) NA NA	ARCHITOWN RD	KELLEY SCOTT E	JKI.		navavoa.	RXA	17921
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(24-04-09-23)	119 HIGH RIDGE RU	MINIO INCIDENCE TO	RETHC	102 GEORGETOWN RD	BOXFORD	MA	01921
(24-04-05)	102 GEORGETOWN RD	LOSEE GRIDLEY MIK		108 GEORGETOWN RD	BOXFORD	MA	01921
(24-04-04)	108 GEORGETOWN RD	LUMMUSUANIELS	MACHIDE DICHELLE W.T.R.	108 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-09-27)	108 HIGH RIDGE RD	MAGUIRE NORMAN K I'K	Madeline	PO BOX 263	BOXFORD	MA	01921
(24-04-09-26)	120 HIGH RIDGE RD	MASSAKO JOSEPH K		107 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-09-21)	107 HIGH RIDGE RD	MASUCCI DONNA M	TALENTY A CKTANED	1100 GRORGETOWN RD	BOXFORD	MA	01921
(24-04-21)	100 GEORGETOWN RD		1	100 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-09-29)	100 HIGH RIDGE RD	SMITH REID H & MAKIHA W 183	79,83	99 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-09-20)	99 HIGH RIDGE RD	WILLIAMS WAYNE G	LOIS D WILLIAMS				

CERITIEIED COPY

(óctober 5, 2015



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.

Massachusetts Department of Environmental ProtectionBureau of Resource Protection - Wetlands

WPA Form 3 - Notice of Intent

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

Pro	vided by MassDEP:
	MassDEP File Number
	Document Transaction Number
	Boxford
	City/Town

A. General Information

	24	Boxford	01921
120 High Ridge Ro	au	b. City/Town	c. Zip Code
Latitude and Longit	ude:	d. Latitude	e. Longitude
Map 24, Block 4		Parcel 9.26	
f. Assessors Map/Plat N	umber	g. Parcel /Lot Number	
. Applicant:			
Joseph		Massaro	
a. First Name		b. Last Name	
c/o The Morin-Can	neron Group, Inc.	=	
c. Organization			
447 Boston Street			
d. Street Address			
Topsfield		MA	01983
e. City/Town		f. State	g. Zip Code
978-887-8586	978-887-3480	john@morincameron.	com
h. Phone Number	i. Fax Number	j. Email Address	
c. Organization	-		
d. Street Address		0	
d. Street Address e. City/Town		f. State	g. Zip Code
	i. Fax Number	f. State j. Email address	g. Zip Code
e. City/Town		10 3.39×30×	g. Zip Code
e. City/Town h. Phone Number		10 3.39×30×	g. Zip Code
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e. City/Town h. Phone Number Representative (if a John a. First Name	any):	j. Email address Morin	g. Zip Code
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street	any):	j. Email address Morin	g. Zip Code
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company	any):	j. Email address Morin b. Last Name	
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street d. Street Address Topsfield	any):	j. Email address Morin b. Last Name	01983
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street d. Street Address	any):	j. Email address Morin b. Last Name	
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street d. Street Address Topsfield	any):	j. Email address Morin b. Last Name	01983 g. Zip Code
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street d. Street Address Topsfield e. City/Town	any): on Group, Inc.	j. Email address Morin b. Last Name MA f. State	01983 g. Zip Code
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street d. Street Address Topsfield e. City/Town 978-887-8586 h. Phone Number	eny): on Group, Inc. 978-887-3480	j. Email address Morin b. Last Name MA f. State john@morincameron. j. Email address	01983 g. Zip Code
e. City/Town h. Phone Number Representative (if a John a. First Name The Morin-Camero c. Company 447 Boston Street d. Street Address Topsfield e. City/Town 978-887-8586 h. Phone Number	978-887-3480 i. Fax Number	j. Email address Morin b. Last Name MA f. State john@morincameron. j. Email address ee Transmittal Form):	01983 g. Zip Code



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Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

)\	rided by MassDEP:
	MassDEP File Number
	Document Transaction Number
	Boxford
	Citv/Town

A. General Information (continued)

6.	General Project Description:			
	The proposed project includes the removal of existing sepremoval of an existing leach pit and the installation of san the 100 foot wetland buffer zone and a portion of this wor work is located within lawfully developed and maintained expansion of the existing lawn and landscaped areas	d fill associated with a septic system; all work is within k is within the 100 foot vernal pool buffer zone. All		
7a.	Project Type Checklist: (Limited Project Types see	Section A. 7b.)		
	1. Single Family Home	2. Residential Subdivision		
	3. Commercial/Industrial	4. Dock/Pier		
	5. Utilities	6. Coastal engineering Structure		
	7. Agriculture (e.g., cranberries, forestry)	8. Transportation		
	9. 🛛 Other			
7b.	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 CMF 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 a CMR10.24(8), 310 CMR 10.53(4)), complete and a Project Checklist and Signed Certification.	n Ecological Restoration Limited Project (310 ttach Appendix A: Ecological Restoration Limited		
8.	Property recorded at the Registry of Deeds for:			
	Essex South			
	a. County	b. Certificate # (if registered land)		
	30999 c. Book	d. Page Number		
B.	B. Buffer Zone & Resource Area Impacts (temporary & permanent)			
1.				
2.	Vegetated Wetland, Inland Bank, or Coastal Re Inland Resource Areas (see 310 CMR 10.54-1) Coastal Resource Areas).	esource Area.		
	Check all that apply below. Attach narrative and an project will meet all performance standards for each	y supporting documentation describing how the n of the resource areas altered, including		

standards requiring consideration of alternative project design or location.



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Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

٧	ided by MassDEP:
	MassDEP File Number
1000	Document Transaction Number
	Boxford
	City/Town

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

Resource Area Size of Proposed Alteration Proposed Replacement (if any) Bank 2. linear feet 1. linear feet Bordering Vegetated Wetland 1. square feet 2. square feet c. 🔲 Land Under 1. square feet 2. square feet Waterbodies and Waterways 3. cubic yards dredged Size of Proposed Alteration Proposed Replacement (if any) Resource Area d. 🔲 Bordering Land Subject to Flooding 1. square feet 2. square feet 3. cubic feet of flood storage lost 4. cubic feet replaced е. 🗌 Isolated Land 1. square feet Subject to Flooding 2. cubic feet of flood storage lost 3. cubic feet replaced 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.

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



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Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

0	vided by MassDEP:
	MassDEP File Number
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	Boxford
	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.

Resource Area		Size of Proposed	Alteration	Proposed Replacement (if any)
а. 🗌	Designated Port Areas	Indicate size un	der Land Under	the Ocean, below
b.	Land Under the Ocean	1. square feet		
		2. cubic yards dredge	d	
c. 🔲	Barrier Beach	Indicate size unde	er Coastal Bead	ches and/or Coastal Dunes below
d. 🗌	Coastal Beaches	1. square feet		2. cubic yards beach nourishment
е. 🗌	Coastal Dunes	1. square feet		2. cubic yards dune nourishment
		Size of Proposed	Alteration	Proposed Replacement (if any)
f. 🔲	Coastal Banks Rocky Intertidal	1. linear feet		
g. 🔲	Shores	1. square feet	1	
h. 🗌	Salt Marshes	1. square feet		2. sq ft restoration, rehab., creation
i. 🔲	Land Under Salt Ponds	1. square feet		
-		2. cubic yards dredge	d	
j. 📙	Land Containing Shellfish	1. square feet		
k. 🗌	Fish Runs			ks, inland Bank, Land Under the Pr Waterbodies and Waterways,
		1. cubic yards dredge	ed .	
I. 🔲	Land Subject to Coastal Storm Flowage	1. square feet		
Restoration/Enhancement If the project is for the purpose of restoring or enhancing a wetland resource area in additions a square footage that has been entered in Section B.2.b or B.3.h above, please enter the additional amount here.				
a. square	e feet of BVW		b. square feet of S	Salt Marsh
☐ Pro	oject Involves Stream Cross	sings		
a. number of new stream crossings			b. number of repla	acement stream crossings

4.

5.



WPA Form 3 - Notice of Intent

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

MassDEP File Number
Document Transaction Number
Document Hansaction Number
Boxford

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 Notice of Intent - 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 <i>Massachusetts Natural Heritage Atlas</i> or go to 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
	b. Date of map Westborough, MA 01581
	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.1.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*
	Percentage/acreage of property to be altered:
	A visible wetland Danaura Area

	() within well and December Asse	
	(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 w wetlands jurisdiction, showing existing and propose tree/vegetation clearing line, and clearly demarcate	ed conditions, existing and proposed
	(a) Project description (including description buffer zone)	on of impacts outside of wetland resource area &
	(b) Photographs representative of the site	

wpaform3.doc • rev. 4/22/2015

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. Page 5 of 9

720	U.S. Postal Service [™] W Z 3355 CERTIFIED MAIL [®] RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com [®] .
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062	Certified Mail Fee \$3,45 Extra Services & Fees (check box, add fee as appropriate)
m	Return Receipt (hardcopy) Return Receipt (electronic) \$ 100
000	Certified Mail Restricted Delivery \$ Here
	Adult Signature Restricted Delivery \$ Postage
1,520	Postage \$
5	Total Postage and Fees
	\$ 40,11
1	Sont Totural Heritage E.S.P.
707	Street and Api, No. on PO Box No. July 1886 Robbit Hill Bl
1-	JAV. O. I. M. S.
	West borough, ma 01501
	PS Form 3800, April 2015 PSN 7580-02-000-9047 See Reverse for Instructions



WPA Form 3 – Notice of Intent

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

01	vided by MassDEP:
	MassDEP File Number
	Document Transaction Number
	Boxford
	Citv/Town

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

	(c) MESA filing fee (fee information available at http://www.mass.gov/dfwele/dfw/nhesp/regulatory review/mesa/mesa fee schedule.htm). Make check payable to "Commonwealth of Massachusetts - NHESP" and <i>mail to NHESP</i> 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/nhesp/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 1213 Purchase Street – 3rd Floor New Bedford, MA 02740-6694 Email: DMF.EnvReview-South@state.ma.us Division of Marine Fisheries - North Shore Office Attn: Environmental Reviewer 30 Emerson Avenue Gloucester, MA 01930 Email: DMF.EnvReview-North@state.ma.us	٠

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.



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

Massachusetts Department of Environmental ProtectionBureau of Resource Protection - Wetlands

WPA Form 3 - Notice of Intent

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 & Under the Town of Boxford's Wetland Protection Bylaw

٥١	vided by MassDEP:
	MassDEP File Number
	Document Transaction Number
	Boxford
	City/Town

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

4. Is any portion of the proposed project within an Area of Critical Environmental Concern (AC				
	a. 🗌 Y	es 🛚	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.				oposed project within an area designated as an Outstanding Resource Water n the Massachusetts Surface Water Quality Standards, 314 CMR 4.00?
	a. 🔲 Y	es 🛚	No	
6.				e subject to a Wetlands Restriction Order under the Inland Wetlands c. 131, § 40A) or the Coastal Wetlands Restriction Act (M.G.L. c. 130, § 105)?
	a. 🔲 Y	es 🏻	No	
7.	Is this p	roject s	ubject to	provisions of the MassDEP Stormwater Management Standards?
	a 1	Sta	andards plying fo	copy of the Stormwater Report as required by the Stormwater Management per 310 CMR 10.05(6)(k)-(q) and check if: or Low Impact Development (LID) site design credits (as described in water Management Handbook Vol. 2, Chapter 3)
	2.	A	oortion o	of the site constitutes redevelopment
	3.	Pr	oprietary	BMPs are included in the Stormwater Management System.
	b. 🛛	No. Ch	eck why	the project is exempt:
	1.	Sir	ngle-fam	ily house
	2.] En	nergency	y road repair
-	3. or			idential Subdivision (less than or equal to 4 single-family houses or less than units in multi-family housing project) with no discharge to Critical Areas.
D.	Addi	tiona	al Info	rmation
				n Ecological Restoration Limited Project. Skip Section D and complete I Restoration Notice of Intent – Minimum Required Documents (310 CMR
	Applica	nts mus	st include	e the following with this Notice of Intent (NOI). See instructions for details.
				the document transaction number (provided on your receipt page) for any of on you submit to the Department.
	1. 🛮	sufficie	ent inforr	map of the area (along with a narrative description, if necessary) containing mation for the Conservation Commission and the Department to locate the site rs may omit this item.)

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.

2.



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D.	Add	itiona	Information	(cont'd)

D.	Add	itional Information (cont'd)		
	3.	Identify the method for BVW and other refield Data Form(s), Determination of Apart and attach documentation of the me	oplicability, Order of Resource	
	4. 🛛	List the titles and dates for all plans and	other materials submitted with	n this NOI.
		nitary Disposal System Repair Plan in Bo seph Massaro(Sheet 1 of 2 only)	oxford, MA, 120 High Ridge Ro	oad prepared for
		e Morin-Cameron Group, Inc.	John M. Morin, PE	
		Prepared By	c. Signed and Stamped by	
		vised October 14, 2015 Final Revision Date	1" = 20' e. Scale	
	u. 1	markevision bate	c. coalc	
	f. A	dditional Plan or Document Title		g. Date
	5.	If there is more than one property owne listed on this form.	r, please attach a list of these	property owners not
	6. 🛛	Attach proof of mailing for Natural Herita	age and Endangered Species	Program, if needed.
	7.	Attach proof of mailing for Massachuse	tts Division of Marine Fisheries	s, if needed.
	8. 🛛	Attach NOI Wetland Fee Transmittal Fo	orm	₩
	9.	Attach Stormwater Report, if needed.		
				ž.
E.	Fees	<u> </u>		
	1.	Fee Exempt: No filing fee shall be asse of the Commonwealth, federally recogn authority, or the Massachusetts Bay Tra	nized Indian tribe housing auth	
		ants must submit the following informatio ransmittal Form) to confirm fee payment:	n (in addition to pages 1 and 2	of the NOI Wetland
	60395		10/14/15	
		cipal Check Number	3. Check date	
	60396		10/14/15	
		Check Number	5. Check date	
		orin-Cameron Group, Inc.	7 Days and a straight	Look Nome
	o. Payo	r name on check: First Name	Payor name on check:	Last Name



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Pro	ovided by MassDEP:
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	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.

1. Signature of Applicant	10 -15 - 2015 2. Date
3. Signature of Property Owner (if different)	4. Date (0-15 - 2015
5. Signature of Representative (if any)	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.



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

2.





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

A. Applicant Information

1. Location of Project:

120 High Ridge Roa	ad	Boxford	
a. Street Address		b. City/Town	
60396		\$42.50	
c. Check number		d. Fee amount	
Applicant Mailing Ad	ddress:		
Joseph		Massaro	
a. First Name		b. Last Name	
c/o The Morin-Cam	eron Group, Inc.		
c. Organization			
447 Boston Street			
d. Mailing Address		· ,	
Topsfield		MA	01983
e. City/Town		f. State	g. Zip Code
978-887-8586	978-887-3480	john@morincameron.com	n
h. Phone Number	i. Fax Number	j. Email Address	

3. Property Owner (if different):

a. First Name		b. Last Name	b. Last Name		
c. Organization					
d. Mailing Address		· · · · · · · · · · · · · · · · · · ·			
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.



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)			ii .
Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
Category 1.e.	1	\$110.00	\$110.00
Town fee: addition/alteration	1	\$200.00	\$200.00
Boundary verification fee (WF A1-A4 and A96-A99, VP 1-4, VP 96-99) = \$320If – 100 = 220If		\$150.00	\$150.00
	-		
			9
	Step 5/T	otal Project Fee:	\$460.00
	Step 6	/Fee Payments:	
	Total	Project Fee:	\$460.00 a. Total Fee from Step 5
	State share	e of filing Fee:	\$42.50 b. 1/2 Total Fee less \$12.50
	City/Town shar	e of filling Fee:	\$417.50 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.)

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Security features. Details on back.

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The Morin-Cameron Group, Inc.

447 Boston Street; Suite 12 Topsfield, MA 01983 978-887-8586



America's Most Convenient Bank®

53-7054-2113

CHECK DATE

10/14/15

PAY

Four hundred seventeen & -----50/100 dollars

TO

Town of Boxford

AMOUNT \$417.50

Location: 120 High Ridge Road, Boxford

The Morin-Cameron Group, Inc.

447 Boston Street; Suite 12 Topsfield, MA 01983 978-887-8586

Bank

America's Most Convenient Bank®

53-7054-2113

CHECK DATE

10/14/15

PAY

Forty-two & -----50/100 dollars

AMOUNT

TO

Commonwealth of Massachusetts

\$42.50

Security features. Details on back.

60396



AFFIDAVIT OF SERVICE

Under the Massachusetts Wetlands Protection Act

(to be submitted to Mass. DEP and the Conservation Commission when filing a Notice of Intent)

I, Kathleen Molina of The Morin-Cameron Group, Inc., hereby certify under the pains and penalties of perjury that on **October 19, 2015** 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 was filed under the Massachusetts Wetlands Protection Act by Joseph Massaro with the Town of Boxford Conservation Commission on October 19, 2015 for property located at 120 High Ridge Road (Assessors Map 24, Block 4, Lot 9.26).

The form of the notification, and a list of the abutters to whom it was given and their addresses, are attached to this Affidavit of Service.

Kathleen Molina

The Morin-Cameron Group, Inc.

447 Boston Street

Topsfield, MA 01983

Oct. 19, 2015 Date

Notification to Abutters Under the Massachusetts Wetland Protection Act

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

- A. The name of the applicant is: **Joseph Massaro**
- B. The applicant has filed a **Notice of Intent** with the Conservation Commission for the municipality of **Boxford** seeking permission to remove, fill, dredge or alter an Area Subject to Protection under the Wetlands Protection Act (General Laws Chapter 131, Section 40).
- C. The address of the lot where the activity is proposed: 120 High Ridge Road
- D. Copies of the Application may be examined & obtained at the Conservation Office, 7A Spofford Road between the hours of 8:30am and 2pm on the following days of the week Monday-Thursday. For more information call: 978-887-6000
- E. Information regarding the date, time and place of the public hearing may be obtained from the Conservation Office by calling this number: 978-887-6000 between the hours of 8:30am and 2pm on the following days of the week: Monday-Thursday
- NOTE: Notice of the public hearing, including its date, time and place, will be published at least five (5) days in advance in the **Tri-Town Transcript.**
- NOTE: Notice of the public hearing, including its date, time and place will be posted in the City or Town Hall not less than forty-eight (48) hours in advance.
- NOTE: You also my 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 MassDEP Northeast Region call: 978-694-3200

PARCEL # 24-4-9.26 $\sim 120~\mathrm{HIGH}$ RIDGE ROAD $\sim \mathrm{CONSERVATION}$ COMMISSION 250' TOWN OF BOXFORD ABUTTER LIST

Map/Lot Location (24-04-06) 94 GEORGETOWN RD (24-04-09-22) 115 HIGH RIDGE RD (24-04-09-25) 126 HIGH RIDGE RD (24-04-09-24) 123 HIGH RIDGE RD (24-04-07) 88 GEORGETOWN RD					CONTROL MICHAEL DE CONTROL DE COMPANIO		1
) 22) -25) 24)		Owner	Owner 2	Owner Address	City/Town	State	Code
(24-04-09-22) 115 HIGH RI (24-04-09-25) 126 HIGH RI (24-04-09-24) 123 HIGH RI (24-04-07) 88 GEORGE	TOWN RD	TATUM JOHN G	TATUM KATHERINE M	94 GEORGETOWN RD	BOXFORD	MA	01921
(24-04-09-25) 126 HIGH RI (24-04-09-24) 123 HIGH RI (24-04-07) 88 GEORGE	IDGE RD	CHOI CHOON SON TE	MYUNG-SOOK CHOI	115 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-09-24) 123 HIGH RI (24-04-07) 88 GEORGET	IDGE RD	DIVENUTI ARTHUR TR	DIVENUTE MARY JACQUELYN TR	126 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-07) 88 GEORGET	IDGE RD	FLYNN SEAN C	ELYNN JULIANNE	123 HIGH RIDGE RD	BOXFORD	MA	01921
	TOWN RD	KELLEY SCOTT E	KELLEY HILLARY	88 GEORGETOWN RD	BOXFORD	MA	01921
(24-04-09-23) 119 HIGH RIDGE RD	IDGE RD	KING ROBERT H	KING SUSAN	119 HIGH RIDGE RD	BOXFORD	MA	01921
1	ETOWN RD	LOSEE GRIDLEY M JR	LOSEE ELIZABETH C	102 GEORGETOWN RD	BOXFORD	MA	01921
	ETOWN RD	LUMMUS DANIEL S		108 GEORGETOWN RD	BOXFORD	MA	01921
(24-04-09-27) 108 HIGH RIDGE RD	IDGE RD	MAGUIRE NORMAN IC TR	MAGUIRE RICHELLE M TR	108 HIGH RIDGE RD	BOXFORD	MA	01921
1	IDGE RD	MASSARO JOSEPH R	Construction of the constr	PO BOX 263	BOXFORD	MA	01921
(24-04-09-21) 107 HIGH RIDGE RD	IDGE RD	MASUCCI DONNA M		107 HIGH RIDGE RD	BOXFORD	MA	01921
(24-04-21) 100 GEORGETOWN RD	ETOWN RD	SKINNER ROY A TE	PAMELA A SKINNER	100 GEORGETOWN RD	BOXFORD	MA	01921
			manufactures.		71 700		
114.00							10 E 10

October 5, 2015

SOUTH GROVELAND QUADRANGLE MASSACHUSETTS-ESSEX CO. 7.5-MINUTE SERIES











