



Massachusetts Department of Environmental Protection
 Bureau of Resource Protection - Wetlands

Provided by MassDEP:

WPA Form 3 – Notice of Intent

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

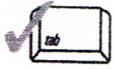
MassDEP File Number

Document Transaction Number

Boxford

City/Town

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):

15 Lantern Lane
 a. Street Address

Boxford
 b. City/Town

01921
 c. Zip Code

Latitude and Longitude:

Map 28 Block 2
 f. Assessors Map/Plat Number

Lot 6
 g. Parcel /Lot Number

d. Latitude

e. Longitude

2. Applicant:

Edward
 a. First Name

Sullivan
 b. Last Name

c. Organization

15 Lantern Lane
 d. Street Address

Boxford
 e. City/Town

MA
 f. State

01921
 g. Zip Code

978-922-0529
 h. Phone Number

i. Fax Number

j. Email Address

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

a. First Name

b. Last Name

c. Organization

d. Street Address

e. City/Town

f. State

g. Zip Code

h. Phone Number

i. Fax Number

j. Email address

4. Representative (if any):

James
 a. First Name

Scanlan
 b. Last Name

Scanlan Engineering LLC
 c. Company

PO Box 906
 d. Street Address

Georgetown
 e. City/Town

MA
 f. State

01833
 g. Zip Code

978-372-3440
 h. Phone Number

978-891-3888
 i. Fax Number

jim@scanlanengineering.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

\$67.50
 c. City/Town Fee Paid



WPA Form 3 - Notice of Intent

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

MassDEP File Number

Document Transaction Number

Boxford

City/Town

A. General Information (continued)

6. General Project Description:

Septic System Upgrade and Well

7a. Project Type Checklist:

- 1. [X] Single Family Home
2. [] Residential Subdivision
3. [] Limited Project Driveway Crossing
4. [] Commercial/Industrial
5. [] Dock/Pier
6. [] Utilities
7. [] Coastal Engineering Structure
8. [] Agriculture (e.g., cranberries, forestry)
9. [] Transportation
10. [] Other

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

1. [] Yes [X] No If yes, describe which limited project applies to this project:

2. Limited Project

8. Property recorded at the Registry of Deeds for:

Essex County South

a. County

33419

c. Book

b. Certificate # (if registered land)

165

d. Page Number

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

- 1. [X] 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.
2. [] 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.

Table with 3 columns: Resource Area, Size of Proposed Alteration, Proposed Replacement (if any). Rows include Bank, Bordering Vegetated Wetland, and Land Under Waterbodies and Waterways.

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



WPA Form 3 – Notice of Intent

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

MassDEP File Number _____

Document Transaction Number _____

Boxford _____

City/Town _____

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

<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) _____	

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)

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.

<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 _____

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



WPA Form 3 – Notice of Intent

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

MassDEP File Number _____

Document Transaction Number _____

Boxford _____

City/Town _____

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

	<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

C. Other Applicable Standards and Requirements

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.

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
100 Hartwell Street, Suite 230
West Boylston, MA 01583**

MassGIS _____

b. Date of map _____



WPA Form 3 – Notice of Intent

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

MassDEP File Number _____

Document Transaction Number _____

Boxford _____

City/Town _____

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

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.d, 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).*

1. c. Submit Supplemental Information for Endangered Species Review*

1. Percentage/acreage of property to be altered:

(a) within wetland Resource Area 0 acres
percentage/acreage _____

(b) outside Resource Area _____
percentage/acreage _____

2. Assessor's Map or right-of-way plan of site

3. 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

(c) MESA filing fee (fee information available at <http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/mass-endangered-species-act-mesa/mesa-fee-schedule.html>). 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

d. 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/eea/agencies/dfg/dfw/laws-regulations/cmr/321-cmr-1000-massachusetts-endangered-species-act.htm#10.14>; 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 _____

* 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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

Boxford

City/Town

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

- 3. Separate MESA review completed.
Include copy of NHESP "no Take" determination or valid Conservation & Management Permit with approved plan.

- 2. 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 or hand delivery of NOI to either:

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

North Shore - Hull to New Hampshire:

Division of Marine Fisheries - Southeast Marine Fisheries Station
Attn: Environmental Reviewer
1213 Purchase Street – 3rd Floor
New Bedford, MA 02740-6694

Division of Marine Fisheries - North Shore Office
Attn: Environmental Reviewer
30 Emerson Avenue
Gloucester, MA 01930

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.

- 3. Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?

- a. Yes No If yes, provide name of ACEC (see instructions to WPA Form 3 or MassDEP Website for ACEC locations). **Note:** electronic filers click on Website.

- b. ACEC

- 4. 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

- 5. 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

- 6. 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

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



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

Boxford

City/Town

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

- 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

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.
- 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.

Subsurface Sewage Disposal System Upgrade 15 Lantern Lane, Boxford

a. Plan Title

Scanlan Engineering LLC

b. Prepared By

Nov 24, 2014

d. Final Revision Date

James Scanlan PE

c. Signed and Stamped by

1"-20'

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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number _____

Document Transaction Number _____

Boxford

City/Town

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:

2. Municipal Check Number	5454	3. Check date	1/15/15
4. State Check Number	5453	5. Check date	1/15/15
6. Payor name on check: First Name	SCANLAN ENGINEERING LLC		
7. Payor name on check: Last Name	_____		

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		2. Date	1/13/15
3. Signature of Property Owner (if different)	_____	4. Date	_____
5. Signature of Representative (if any)		6. Date	1/15/15

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:

15 Lantern Lane

a. Street Address

Boxford

b. City/Town

c. Check number

d. Fee amount

2. Applicant Mailing Address:

Edward

a. First Name

Sullivan

b. Last Name

c. Organization

15 Lantern Lane

d. Mailing Address

Boxford

e. City/Town

MA

f. State

01921

g. Zip Code

978-922-0529

h. Phone Number

i. Fax Number

j. Email Address

3. Property Owner (if different):

a. First 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

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.

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

B. Fees (continued)

Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
Cat 1-Septic System Upgrade/Well	1	110.00	110.00

Step 5/Total Project Fee: \$110.00

Step 6/Fee Payments:

Total Project Fee:	<u>\$110.00</u>
State share of filing Fee:	<u>\$42.50</u>
City/Town share of filling Fee:	<u>\$67.50</u>
	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.)

SCANLAN ENGINEERING LLC

2 CARLIDA RD
GROVELAND, MA 01834

5453

DATE 1-15-15

53-7054/2113
04

PAY TO THE ORDER OF Commonwealth of Massachusetts

\$ 42.50

Forty two and 50/100

DOLLARS



Bank
America's Most Convenient Bank®

FOR Sullivan 15 LANTERN LN NO1

James Scanlan

⑈005453⑈ ⑆211370545⑆ 8248197051⑈

SCANLAN ENGINEERING LLC

2 CARLIDA RD
GROVELAND, MA 01834

5454

DATE 1-15-15

53-7054/2113
04

PAY TO THE ORDER OF TOWN OF BOXFORD

\$ 267.50

Two Hundred Sixty Seven and 50/100

DOLLARS



Bank
America's Most Convenient Bank®

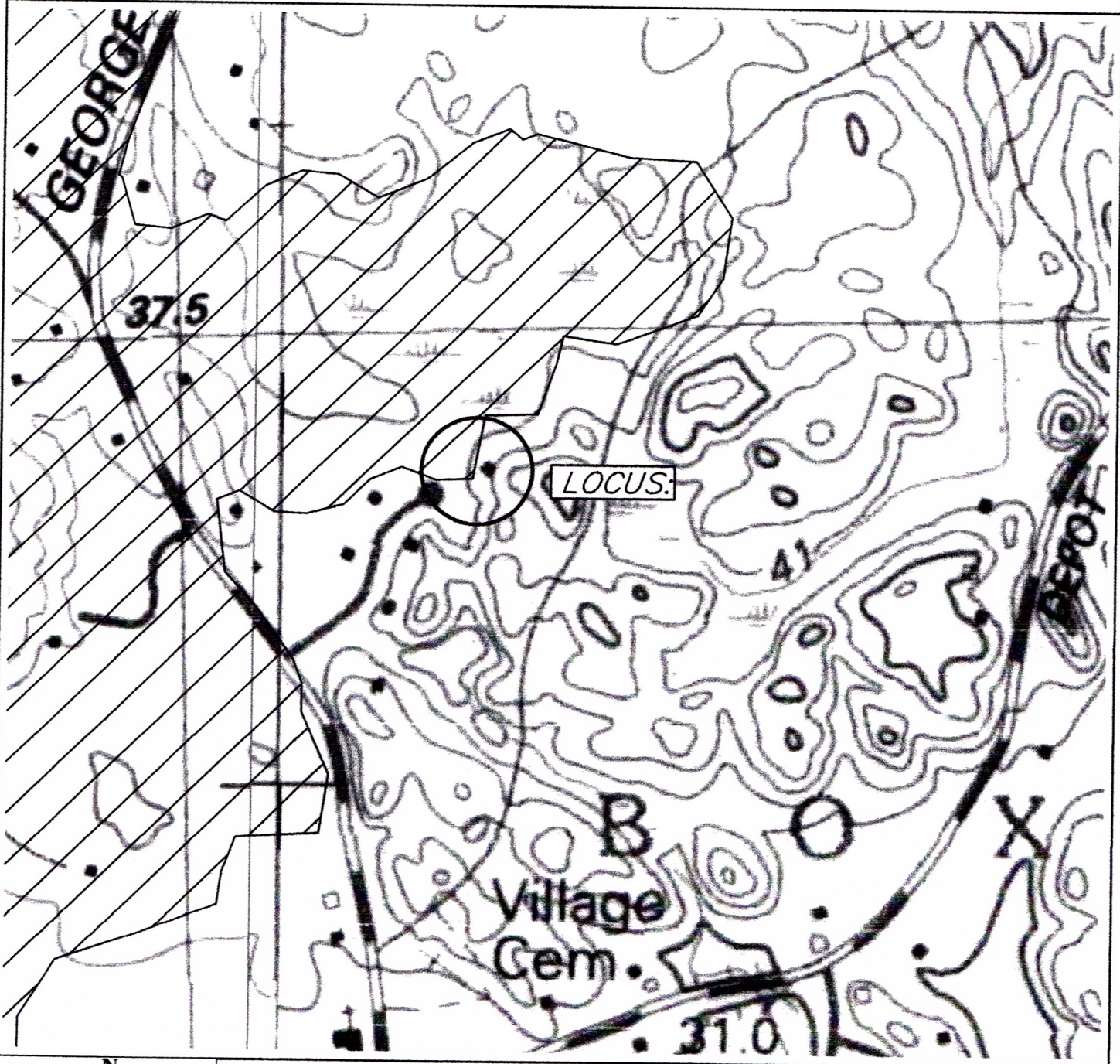
FOR _____

James Scanlan

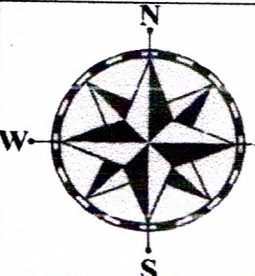
⑈005454⑈ ⑆211370545⑆ 8248197051⑈

Natural Heritage Endangered Species Program

from MassGIS Website



LOCUS PLAN

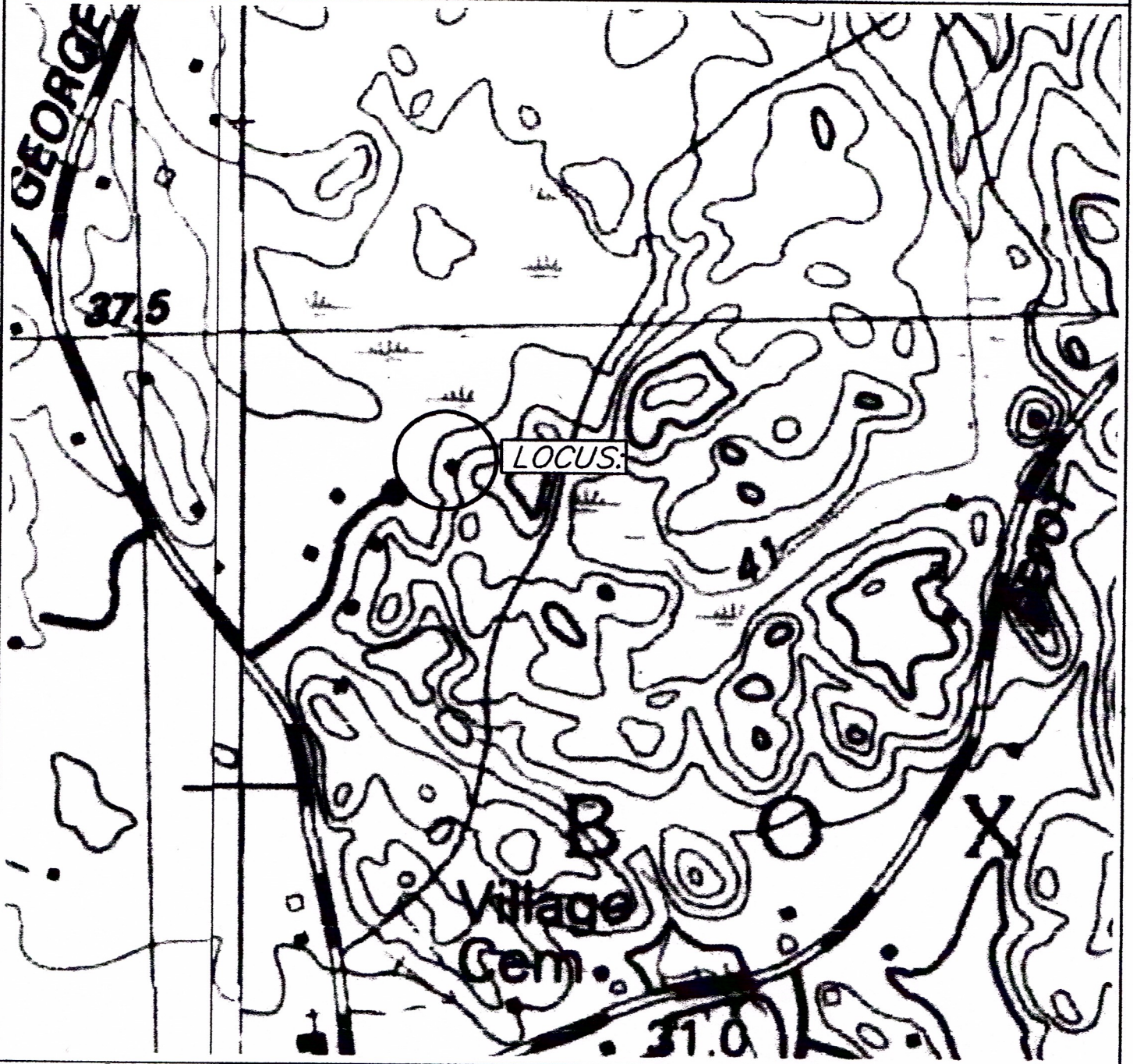


Sullivan Property
15 Lantern Lane
Boxford, MA 01921

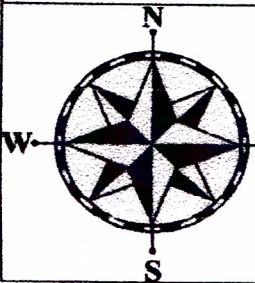
Scale: 1"=500'
Date: 1/15/15
SE#0634

USGS TOPOGRAPHIC PLAN

from MassGIS Website



LOCUS PLAN



Sullivan Property
15 Lantern Lane
Boxford, MA 01921

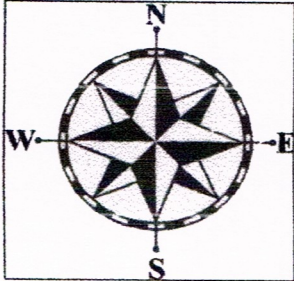
Scale: 1"=500'
Date: 1/15/15
SE#0634

AERIAL VIEW

from MassGIS Website



LOCUS:



LOCUS PLAN

Sullivan Property
15 Lantern Lane
Boxford, MA 01921

Scale: 1"=500'
Date: 1/15/15
SE#0634

TOWN OF BOXFORD
ABUTTER LIST

PARCEL # 28-2-6 ~ 15 LANTERN LANE ~ CONSERVATION COMMISSION 250'

Map/Lot	Location	Owner	Owner 2	Owner Address	Owner City/Town	Owner State	Zip Code
(29-1-10)	DEPOT RD OFF	BTA/BOLT INC		P O BOX 95	BOXFORD	MA	01921
(28-2-8)	8 LANTERN LN	GENTILE ANTHONY C JR TE	GENTILE JANET M	8 LANTERN LN	BOXFORD	MA	01921
(29-1-34)	28C DEPOT RD	MOSER NATHAN G	MOSER PAULA G	28C DEPOT RD	BOXFORD	MA	01921
(28-2-11)	53 GEORGETOWN RD	RANE PHILIP S TR	RANE REALTY TRUST	53 GEORGETOWN RD	BOXFORD	MA	01921
(28-2-5)	5 LANTERN LN	REGAN JOAN L	JOAN L REGAN REVOCABLE T	5 LANTERN LN	BOXFORD	MA	01921
(29-1-18)	11 LANTERN LN	SIEBOLS PAUL Z TE	SIEBOLS DEBORAH K	11 LANTERN LN	BOXFORD	MA	01921
(28-2-7)	12 LANTERN LN	SIMONELLI LEONARD A	SIMONELLI SAMANTHA M	12 LANTERN LN	BOXFORD	MA	01921
(28-2-6)	15 LANTERN LN	SULLIVAN EDWARD F TE	MARGARET SULLIVAN	15 LANTERN LN	BOXFORD	MA	01921
(29-1-19A)	CHAPMAN LN OFF	THOMPSON PHILIP	THOMPSON JANICE E	23 PROSPECT ST	GEORGETOWN	MA	01833

CERTIFIED COPY

Jan Sullivan

November 19, 2014



LOCATION OF PROPOSED WELL
* IN ESTIMATED HABITAT OF RARE WILDLIFE

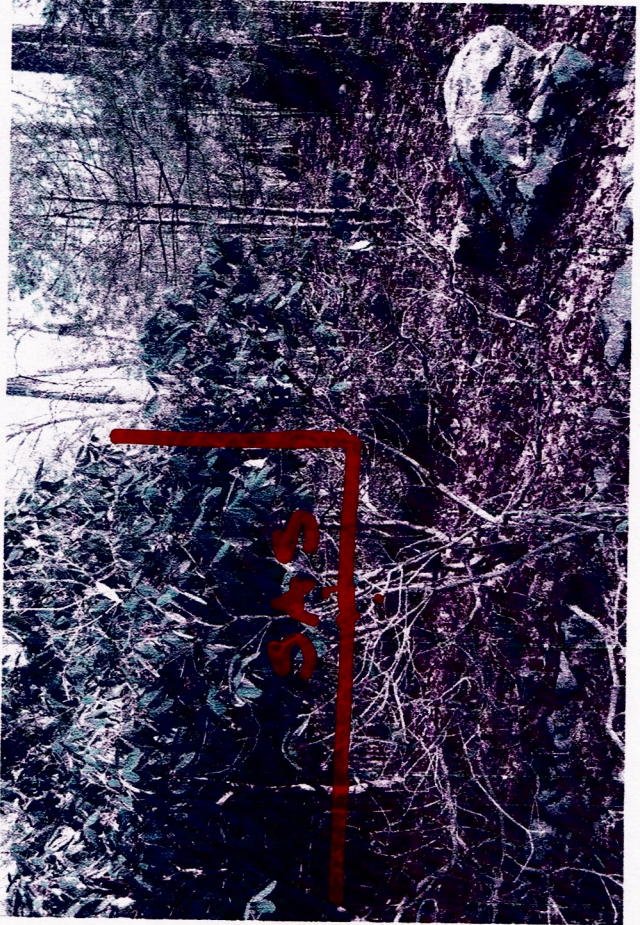




Back of Rhododendron Bushes



Rhododendron Bushes To Be Removed



* Rhododendron Not in ESTIMATED HABITAT OF RARE WILDLIFE



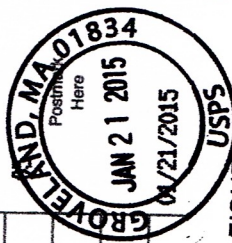
SAS

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

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

OFFICIAL USE

Postage	\$	\$2.24	0834
Certified Fee		\$3.30	
Return Receipt Fee (Endorsement Required)		\$2.70	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$8.24	



Sent To
 Street, Apt. 1
 or PO Box N
 City, State, ZIP+4®
**WESP - DIVISION OF FISHERIES
 ND WILDLIFE
 RABBIT HILL RD
 ESTBOROUGH MA 01581**

PS Form 3826, June 2009

7004 2890 0001 5782 8223