

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

key.

### **Massachusetts Department of Environmental Protection**

Bureau of Resource Protection - Wetlands

City/Town

### WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 Boxford Wetlands Protection Bylaw, Town Code Ch. 192 & 375

### A. General Information

Nai	me	E-Mail Address	3
Ма	ling Address		
City	//Town	State	Zip Code
Pho	one Number	Fax Number (if	fapplicable)
N	presentative (if any):  D LANDSCAPE, TNC.		
Firr <b>K</b>	ASHTON ASHTON	kashton(	3 nalandscape.co
Col	ntact Name	E-Mail Address	
<u>X</u> Ma	MARTEL WAY		
	BORGETONY	M	<i>918</i> 33
	770wn 78 352 5400	State <b>948</b> 352	Zip Code <b>2. 8834</b>
	one Number	Fax Number (if	
. D	eterminations		
	David	ng determination(s	s). Check any that apply:
	equest the BOXFORD make the following		
	equest the BOXFORD make the following Conservation Commission  a. whether the area depicted on plan(s) and/or map(s) representations.	referenced below	is an area subject to
	a. whether the <b>area</b> depicted on plan(s) and/or map(s) r jurisdiction of the Wetlands Protection Act.  b. whether the <b>boundaries</b> of resource area(s) depicted	referenced below d on plan(s) and/o	is an area subject to r map(s) referenced
	make the following conservation Commission  a. whether the <b>area</b> depicted on plan(s) and/or map(s) rejurisdiction of the Wetlands Protection Act.  b. whether the <b>boundaries</b> of resource area(s) depicted below are accurately delineated.	referenced below d on plan(s) and/o w is subject to the	is an area subject to r map(s) referenced Wetlands Protection Act.
	make the following conservation Commission  a. whether the area depicted on plan(s) and/or map(s) rejurisdiction of the Wetlands Protection Act.  b. whether the boundaries of resource area(s) depicted below are accurately delineated.  c. whether the work depicted on plan(s) referenced below.  d. whether the area and/or work depicted on plan(s) references.	referenced below d on plan(s) and/o w is subject to the	is an area subject to r map(s) referenced Wetlands Protection Act.



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

City/Town

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

Boxford Wetlands Protection Bylaw, Town Code Ch. 192 & 375

C.	Pr	oje	ct	De	<b>e</b> s	cr	qi	ti	or	1
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19-3-16	City/Town	
Assessors Map/Plat Number	Parcel/Lot Number	
	ditional paper, if necessary):	
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	•	
···		
c. Plan and/or Map Referen	nce(s):	8/1/2017
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THE SOXFORD MIMAP	• • • • • • • • • • • • • • • • • • • •	Date Do Olil
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### C. Project Description (cont.)

a. Ri	If this application is a Request for Determination of Scope of Alternatives for work in the verfront Area, indicate the one classification below that best describes the project.
	Single family house on a lot recorded on or before 8/1/96
	Single family house on a lot recorded after 8/1/96
	Expansion of an existing structure on a lot recorded after 8/1/96
` 	Project, other than a single family house or public project, where the applicant owned the lot before 8/7/96
	New agriculture or aquaculture project
	Public project where funds were appropriated prior to 8/7/96
	Project on a lot shown on an approved, definitive subdivision plan where there is a recorded restriction limiting total alteration of the Riverfront Area for the entire subdivision
	Residential subdivision; institutional, industrial, or commercial project
	Municipal project
	District, county, state, or federal government project
	Project required to evaluate off-site alternatives in more than one municipality in an Environmental Impact Report under MEPA or in an alternatives analysis pursuant to an application for a 404 permit from the U.S. Army Corps of Engineers or 401 Water Quality Certification from the Department of Environmental Protection.
b. ab	Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classificative (use additional paper and/or attach appropriate documents, if necessary.)



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

BOX FOR A

## WPA Form 1- Request for Determination of Applicability

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### D. Signatures and Submittal Requirements

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

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

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

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BOXT-ORD		
City/Town MA		Mazı
State		Zip Code
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10. Pand Distandah Section aconde problem Section aconde problem Section	ation of this Request will b	7/3//7
	etion of this Request will b	Act regulations.
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