

10.99: Forms

OCT 23 10 02 AM '91

Form 1



Commonwealth
of Massachusetts

DEP File No

(To be provided by DEP)

City/Town:

Seekonk

Applicant:

Keith J. Correia

**Request for a Determination of Applicability
Massachusetts Wetlands Protection Act, G.L. c. 131, §40**

1. I, the undersigned, hereby request that the Seekonk
Conservation Commission make a determination as to whether the area, described below, or work to be performed on said area, also described below, is subject to the jurisdiction of the Wetlands Protection Act, G.L. c. 131, §40.
2. The area is described as follows. (Use maps or plans, if necessary, to provide a description and the location of the area subject to this request.)

Location: Street Address Papino Road

Lot Number: Plat 21 Lot 288

3. The work in said area is described below. (Use additional paper, if necessary, to describe the proposed work.)

To excavate a small depression approximately 80 feet from an existing detention basin to contain surface water runoff from a new driveway. No fill will be placed in the buffer zone.

10.99: continued

4. The owner(s) of the area, if not the person making this request, has been given written notification of this request on N/A (date)

The name(s) and address(es) of the owner(s):

Keith Correia
34 Papino Drive
Seekonk, Mass. 02771

5. I have filed a complete copy of this request with the appropriate regional office of the Massachusetts Department of Environmental Protection october 8, 1991 (date)

DEP Northeast Regional Office
5 Commonwealth Avenue
Woburn, MA 01801

DEP Southeast Regional Office
Lakeville Hospital
Route 105
Lakeville, MA 02347

DEP Central Regional Office
75 Grove Street
Worcester, MA 01605

DEP Western Regional Office
State House West, 4th Floor
436 Dwight Street
Springfield, MA 01103

6. I understand that notification of this request will be placed in a local newspaper at my expense in accordance with Section 10.05(3) (b) 1 of the regulations by the Conservation Commission and that I will be billed accordingly.

Signature _____

Name Keith J. Correia

Address _____ Tel _____