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Massachusetts Department of Environmental Protection Bureau of Resource Protection - Wetlands

Leicester City/Town

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

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

2.

| Christopher Hallen Name E-Mail Address 19 Ackley Drive Mailing Address | nail.com |
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| 19 Ackley Drive Mailing Address | |
| Mailing Address | |
| | |
| | |
| Rochdale | 01542 |
| City/Town State | Zip Code |
| 508-304-2878 | |
| Phone Number Fax Number (if application | able) |
| 2. Representative (if any): | |
| Owner | |
| Firm | |
| Contact Name E-Mail Address | |
| Mailing Address | |
| City/Town State | Zip Code |
| Phone Number Fax Number (if application of the control of the cont | able) |
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| B. Determinations | |
| | eck any that apply: |
| B. Determinations 1. I request the Leicester make the following determination(s). Chempose | eck any that apply: |
| I request the Leicester make the following determination(s). Che | |
| I request the Leicester make the following determination(s). Che Conservation Commission a. whether the area depicted on plan(s) and/or map(s) referenced below is an accordance. | area subject to |
| I request the Leicester make the following determination(s). Che Conservation Commission a. whether the area depicted on plan(s) and/or map(s) referenced below is an a jurisdiction of the Wetlands Protection Act. b. whether the boundaries of resource area(s) depicted on plan(s) and/or map | area subject to |
| I request the Leicester make the following determination(s). Che Conservation Commission a. whether the area depicted on plan(s) and/or map(s) referenced below is an a jurisdiction of the Wetlands Protection Act. b. whether the boundaries of resource area(s) depicted on plan(s) and/or map below are accurately delineated. | area subject to o(s) referenced ands Protection Act |
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| I request the Leicester make the following determination(s). Che Conservation Commission a. whether the area depicted on plan(s) and/or map(s) referenced below is an a jurisdiction of the Wetlands Protection Act b. whether the boundaries of resource area(s) depicted on plan(s) and/or map below are accurately delineated c. whether the work depicted on plan(s) referenced below is subject to the Wetla d. whether the area and/or work depicted on plan(s) referenced below is subject of any municipal wetlands ordinance or bylaw of: Town of Leicester | area subject to o(s) referenced ands Protection Act ct to the jurisdiction erfront Area as |

Town of Leicester Development & Inspectional Services



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C. Project Description (cont.)

| b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary). |
|--|
| proposed well to be installed 90' from existing wetland. Lawn area to be maintained. existing stone wall is located between the proposed well and wetlands. Digsafe has been notified & silt fence and haybales have been installed. |
| |
| |
| a. If this application is a Request for Determination of Scope of Alternatives for work in the Riverfront 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 deed 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. Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classification above (use additional paper and/or attach appropriate documents, if necessary.) |
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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.

| Name and address of the property owner: | | | | |
|--|----------|--|--|--|
| Christopher Hallen | | | | |
| Name | | | | |
| 19 Ackley Drive | | | | |
| Mailing Address | | | | |
| Rochdale | | | | |
| City/Town | | | | |
| MA | 01542 | | | |
| State | Zip Code | | | |
| Signatures: I also 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 Wetlands Protection Act regulations. | | | | |
| Signature of Applicant | Date | | | |
| | | | | |
| Signature of Representative (if any) | Date | | | |
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| Town of Leice | |
| 72019 Town of Leice | |
| 04/2019 Town of Leice | |
| 06/04/2019 Town of Leice | |

| | | Owner | Co-Owner | Mailing Address | City | State | State Zip |
|--------------------------|--|----------------------------------|------------------------------------|-------------------|----------|-------|------------|
| 47 A21 0 11 CHARLTON ST | TS NC | LEBOEUF WILLIAM E | LEBOEUF SANDRA M | 11 CHARLTON ST | ROCHDALE | MA | MA 01542 |
| 47 A21.1 0 9 CHARLTON ST | N ST | LEBOEUF STEVEN D | LEBOEUF SUSAN H | 9 CHARLTON STREET | ROCHDALE | MA | 01542-1015 |
| 47 A22 0 10 ACKLEY DR | DR | BRIGNOLA GIOVANNI | BRIGNOLA BARBARA J | P O BOX 7 | ROCHDALE | MA | 01542-0007 |
| 47 A25 0 CHARLTON | V ST. | SMITH JEAN M | | 47 CHARLTON ST | ROCHDALE | MA | 01542 |
| 47A A2.2 0 15 ACKLEY [| 15 ACKLEY DRY CONTACT DEVINABENOIT DEBORAH (| WAS BENOIT DEBORAH C () () () | | 15 ACKLEY DRIVE | ROCHDALE | MA | 01542 |
| 47A A5 0 740 PLEASANT ST | ANT ST | LMP REALTY TRUST | FARON EDWARD L PATRICI, PO BOX 364 | I, PO BOX 364 | ROCHDALE | MA | 01542 |

End of Report

SEDERTO 6/10/19 SENDAND 6/10/19 Swift word 6/10/19 Jean M. Amet 6/11/9 RECEIVED

JUN 13 2019

Above is a certified list of direct abutters including abutters across the street. Subject property: 19 Ackley Drive, Assessors Map 47A-A3-0, Deed Ref. 43228/379

Subject owner(s): Christopher & Margaret Hallen

Town of Leicester
Development & Inspectional Services

I Christopher Hallen wish to install a private well to serve my single hamly home at 19 Achley drive in Rochdale Mar 01542. The proposed well is 90 feet from existing wetland area. Dissafe has been notified and area has already been Marked. Silt fence has been installed around the propert and has been well maintained since new addition was completed.



TOWN OF LEICESTER BOARD OF HEALTH 3 Washburn Square LEICESTER, MASSACHUSETTS, 01524-1

Board Members
Chairman
Christopher M. Montiverdi
Vice-Chairman
Debra Rigiero
Member
Robin Wood

Phone: 508-892-7008

FAX: 508-892-7500

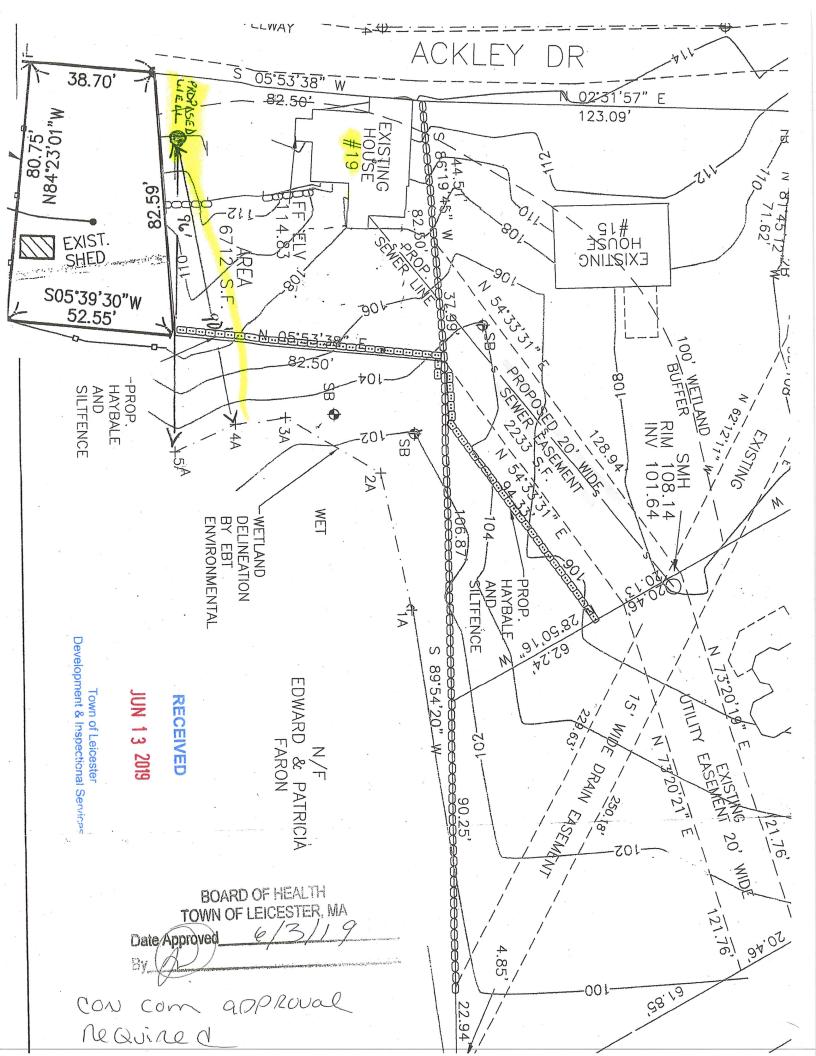
Director of Public Health Darlene M. O'Connor

PERMIT APPLICATION FOR WELL CONSTRUCTION

FEE: \$ 100.00

| In accordance with the Rules and Regulations of the Town of Leicester and the Commonwealth | of |
|--|----|
| Massachusetts application is hereby to construct, install, or alter a well at: | |
| | |

| WATER SAMPLES MUST BE COLLECTED BY A REPRESENTATIVE OF A STACE CERTIFIED LABORATORY. | |
|--|-----------------------|
| Property Owner Name: Christopher Hallen Address: 19 Ackley dr. Ro | cholale |
| Telephone: 508 304 2878 Fax: | |
| Well Contractor Name: Richardson Wells & Pumps Registration # 85, 790 | |
| Address: 314 Chestratst. Uxbrdge Tel: 508278533 Fax: 508278369. | 3 |
| Location of Well | <u>.</u> |
| Type of Well Drilled Dug | * . * |
| Purpose of Well Drinking Water Lawn or Shrub Watering Industrial Process Water JUN 13 2 | |
| Other — Specify Town of Leice Attach a sketch or plan showing the following: Development & Inspection | ster onal Services |
| The building to be served, property lines, location of existing, proposed, or adjacent sewage disposition within 100', and any other information required by the Board of Health or its Agent. | sal systems |
| An As-Built plan certified by an engineer, will need to be submitted to this office for revisional inspection from the Board of Health will be required prior to approval of a Certifica Compliance. | |
| I hereby agree to comply with all Rules and Regulations of the Town of Leicester and the Commo Massachusetts regarding the installation of wells. | onwealth of |
| Signature Date | |



RECEIVED

JUN 13 2019

