



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

# WPA Form 3 – Notice of Intent

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

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

Leicester

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):

25 Lakeview Drive

a. Street Address

Leicester

b. City/Town

01524

c. Zip Code

Latitude and Longitude:

42.227068

d. Latitude

71.936602

e. Longitude

28B

f. Assessors Map/Plat Number

A20

g. Parcel /Lot Number

2. Applicant:

Michael & Cheryl

a. First Name

Cooney

b. Last Name

c. Organization

PO Box 333

d. Street Address

Leicester

e. City/Town

MA

f. State

01524

g. Zip Code

774.368.0438

h. Phone Number

i. Fax Number

cscorney@aol.com

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):

Jason

a. First Name

Dubois

b. Last Name

DC Engineering & Survey, Inc.

c. Company

32 Cranberry Meadow Road

d. Street Address

Charlton

e. City/Town

MA

f. State

01507

g. Zip Code

508.769.6659

h. Phone Number

i. Fax Number

jdub862001@yahoo.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

\$95.00

(\$67.50+\$27.50 town fee)



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### A. General Information (continued)

6. General Project Description:

Building addition, construction/repair of a retaining walls, tree removal for driveway installation and septic tank installation. All within the 100-ft buffer zone of Cedar Meadow Lake.

7a. Project Type Checklist: (Limited Project Types see Section A. 7b.)

- |   |   |
|---|---|
| 1. <input checked="" type="checkbox"/> Single Family Home             | 2. <input type="checkbox"/> Residential Subdivision       |
| 3. <input type="checkbox"/> Commercial/Industrial                     | 4. <input type="checkbox"/> Dock/Pier                     |
| 5. <input type="checkbox"/> Utilities                                 | 6. <input type="checkbox"/> Coastal engineering Structure |
| 7. <input type="checkbox"/> Agriculture (e.g., cranberries, forestry) | 8. <input type="checkbox"/> Transportation                |
| 9. <input type="checkbox"/> Other                                     |   |

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 CMR 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 an Ecological Restoration Limited Project (310 CMR 10.24(8), 310 CMR 10.53(4)), complete and attach Appendix A: Ecological Restoration Limited Project Checklist and Signed Certification.

8. Property recorded at the Registry of Deeds for:

Worcester

a. County

57426

c. Book

b. Certificate # (if registered land)

263

d. Page Number

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

1. ☒ 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.





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Bureau of Resource Protection - Wetlands

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

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

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

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
a. <input type="checkbox"/> Bank	1. linear feet	2. linear feet
b. <input type="checkbox"/> Bordering Vegetated Wetland	1. square feet	2. square feet
c. <input type="checkbox"/> Land Under Waterbodies and Waterways	1. square feet 3. cubic yards dredged	2. square feet

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
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. ☐ 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.



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Bureau of Resource Protection - Wetlands

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

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

Leicester

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.

<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 _____
<hr/>		
<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 BWV _____ 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 _____		





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**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 Limited Project Checklists – 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 *Massachusetts Natural Heritage Atlas* or go to [http://maps.massgis.state.ma.us/PRI\\_EST\\_HAB/viewer.htm](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  
Westborough, MA 01581

2013

b. Date of map

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.2.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\*

1. ☐ Percentage/acreage of property to be altered:

(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 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

\* 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.



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**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](http://www.mass.gov/dfwele/dfw/nhesp/regulatory_review/ mesa/ mesa_fee_schedule.htm)).  
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

- (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](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](mailto:DMF.EnvReview-South@state.ma.us)

North Shore - Hull to New Hampshire border:

Division of Marine Fisheries -  
North Shore Office  
Attn: Environmental Reviewer  
30 Emerson Avenue  
Gloucester, MA 01930  
Email: [DMF.EnvReview-North@state.ma.us](mailto:DMF.EnvReview-North@state.ma.us)

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.





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Provided by MassDEP:

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Document Transaction Number

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

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

4. 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
5. 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
6. 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
7. 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
  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

- ☐ This is a proposal for an Ecological Restoration Limited Project. Skip Section D and complete Appendix A: Ecological Restoration Notice of Intent – Minimum Required Documents (310 CMR 10.12).

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.



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**D. Additional Information (cont'd)**

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.

Septic System Plan Repair

a. Plan Title

DC Engineering & Survey, Inc.

b. Prepared By

TBD

d. Final Revision Date

Jason Dubois

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.

**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:

3345

2. Municipal Check Number

3347

4. State Check Number

Cheryl

6. Payor name on check: First Name

9-29-2018

3. Check date

9-29-2018

5. Check date

Cooney

7. Payor name on check: Last Name





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

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### 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

3. Signature of Property Owner (if different)

4. Date

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.

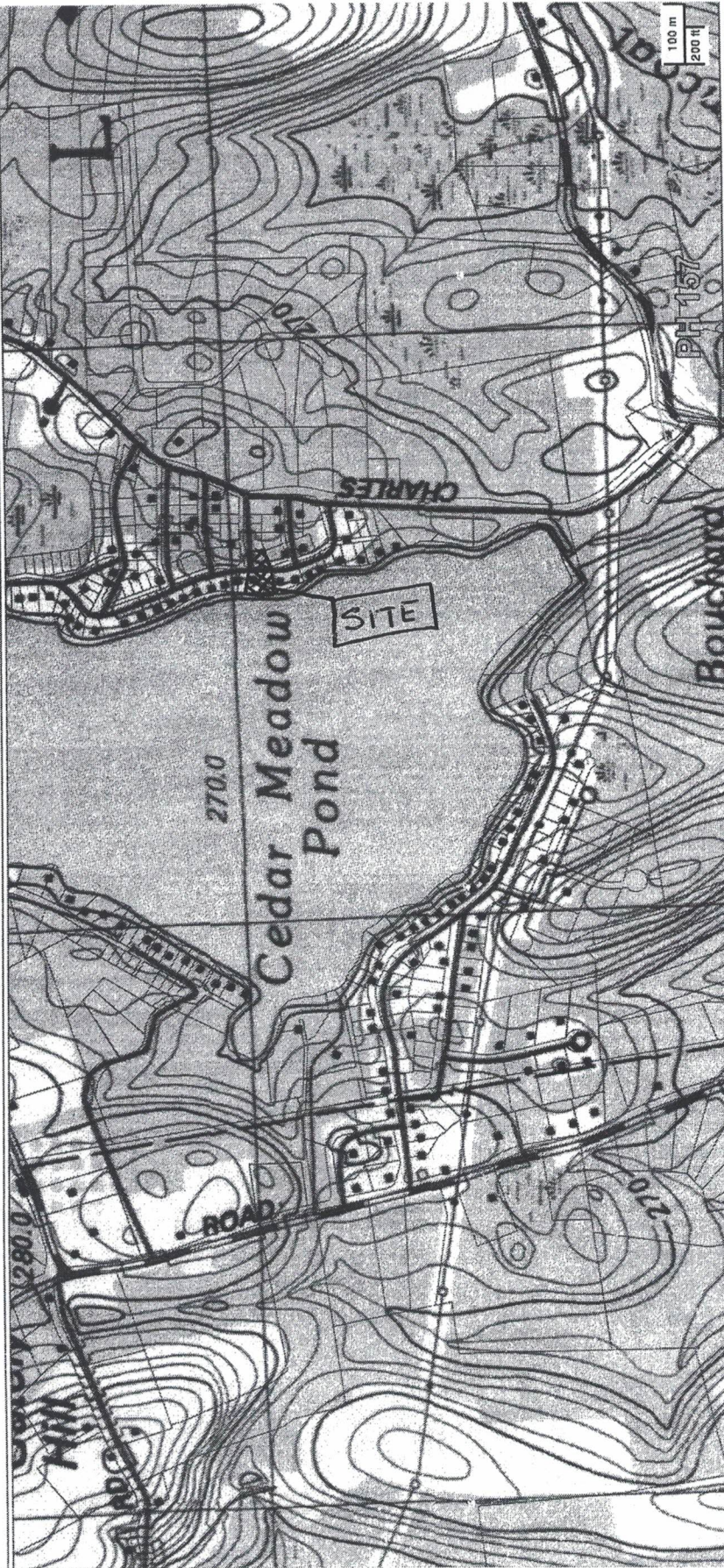
#### Other:

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.



USGS - NHESP MAP





# Town of Leicester

## Abutters List

Page 1 of 1

10/03/2018

8:57:22AM

ParcelID	Location	Owner	Co-Owner	Mailing Address	City	State Zip
28 A12 0	CHARLES ST	CEDAR MEADOW LAKE --	WATERSHED DISTRICT	PO BOX 320	LEICESTER	MA 01524
28B A18 0	31 LAKE VIEW DR	LAWTON GARY R --		15 WAYCROSS ST	WORCESTER	MA 01605
28B A19 0	29 LAKE VIEW DR	WATERMAN BRIAN P		29 LAKE VIEW DR	LEICESTER	MA 01524
28B A21 0	21 LAKE VIEW DR	FORSBERG THOMAS A AUDREY L	FORSBERG LISA A TRUSTE	66 HILL STREET	AUBURN	MA 01501
28B A22 0	17 LAKE VIEW DR	ROSE MICHAEL P		17 LAKE VIEW DR	LEICESTER	MA 01524
28B F1 0	LAKE VIEW DR	LAWTON GARY R		15 WAYCROSS ST	WORCESTER	MA 01605
28B F10 0	4 HEMLOCK LN	MORGAN CLAUDIA L	URBSIS CHRISTOPHER	4 HEMLOCK LN	LEICESTER	MA 01524
28B G1 0	24 LAKE VIEW DR	COONEY MICHAEL F	COONEY CHERYL S	PO BOX 333	LEICESTER	MA 01524
28B G2 0	5 HEMLOCK LN	PRINCE AMY M --		5 HEMLOCK LANE	LEICESTER	MA 01524
28B G8 0	BIRCH LN	SAVOY CODY		20 LAKEVIEW DR	LEICESTER	MA 01524
28B G9 0	20 LAKE VIEW DR	SAVOY CODY		20 LAKEVIEW DR	LEICESTER	MA 01524
28B H1 0	18 LAKE VIEW DR	CARIBO LISA J		18 LAKE VIEW DR	LEICESTER	MA 01524

End of Report

Above is a certified list of abutters and abutters to abutters within 300 feet of subject.  
Subject property: 25 Lakeview Drive, Assessors Map 28B-A20-0, Deed Ref. 57426/263  
Subject owner(s): Michael & Cheryl Cooney

John Prescott, Principal Assessor

Prepared by: Kathleen Asquith, Assistant

## NOTIFICATION TO ABUTTERS UNDER THE MASSACHUSETTS WETLAND PROTECTION ACT

In accordance with the second paragraph of Massachusetts General Laws, Chapter 131, 40, you are hereby notified of the following work within the 100' buffer zone of a wetland:

- A. The name of the applicant is: Michael & Cheryl Cooney
- B. The address of the lot where the activity is proposed is: 25 Lakeview Drive
- C. The applicant has filed a   X   Notice of Intent or a        Request of Determination with the Leicester Conservation Commission seeking permission to remove, fill, dredge or alter an Area Subject to Protection under the Wetland Protection Act (MGL c. 131, 40).
- D. Copies of the application may be examined at the office of the Leicester Conservation Commission, Town Hall, between the hours of 8:00 a.m and 3:00 p.m. Monday through Thursday. Telephone is (508) 892-7008. Additional times are available by appointment.
- E. Copies of the application may be obtained from either the        applicant, or   X   the applicant's representative, by calling this telephone number (508) 769-6659 on Monday – Friday between the hours of 8:00 a.m. and 4:00 p.m. There is a \$5.00 fee for copies.
- F. Information regarding the date, time and place of the public hearing may be obtained from the Leicester Conservation Commission. If available from the applicant, check here   X   and see the information available in # E. By calling (508) 892-7008

NOTE: At least five days in advance, notice of the Public hearing will be published in a newspaper of general circulation. The notice will include the hearing date, time and place, Notice of the Public Hearing will be posted in the Town Hall not less than forty-eight (48) hours in advance.





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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:

25 Lakeview Drive

a. Street Address

Leicester

b. City/Town

c. Check number

d. Fee amount

2. Applicant Mailing Address:

Michael & Cheryl

a. First Name

Cooney

b. Last Name

c. Organization

PO Box 333

d. Mailing Address

Leicester

e. City/Town

MA

f. State

01524

g. Zip Code

774.368.0438.

h. Phone Number

i. Fax Number

cscorney@aol.com

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	1	\$110.00	\$110.00

**Step 5/Total Project Fee:** \$110.00

**Step 6/Fee Payments:**

Total Project Fee:	<u>\$110.00</u>
	a. Total Fee from Step 5
State share of filing Fee:	<u>\$42.50</u>
	b. 1/2 Total Fee <b>less</b> \$12.50
City/Town share of filling Fee:	<u>\$67.50</u>
	c. 1/2 Total Fee <b>plus</b> \$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.)



CHERYL S COONEY  
MICHAEL F COONEY  
PO BOX 333  
LEICESTER, MA 01524

3347

53-7173/2113  
23272

9-29-18  
Date

CHECK ARBOR  
FRAUD PROTECTION

Pay to the  
Order of

Commonwealth of MA  
fifty two + 50/100

\$ 42.50

Dollars



Photo  
Safe  
Deposit  
Details on back



For \_\_\_\_\_

C. S. Cooney MP

⑆211371735⑆ 102 389983 4⑈03347

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CHERYL S COONEY  
MICHAEL F COONEY  
PO BOX 333  
LEICESTER, MA 01524

3345

53-7173/2113  
23272

9-29-18  
Date

CHECK ARBOR  
FRAUD PROTECTION

Pay to the  
Order of

Town of Leicester

\$ 95.00

Ninety-five + XX/100

Dollars



Photo  
Safe  
Deposit  
Details on back



For \_\_\_\_\_

C. S. Cooney MP

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