

Massachusetts Department of Environmental ProtectionBureau of Resource Protection - Wetlands

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	A .	Applicant:		tel@gmail.co	
forms on the computer, use only the tab key to move your		Chad Arcouette 184 River St Mailing Address	MCA/Couc E-Mail Address	tte 160 gmail, Co	
cursor - do not use the return key.		Rechdale City/Town	MA State	<u>0/542</u> Zip Code	
IMEO NO.	CCI	1 508 - 326-3920 Phone Number	Fax Number (if appli	cable)	
	Þ.	Representative (if any):			
<u>V</u> y		Firm			
		Contact Name	E-Mail Address		
		Mailing Address	04-4-	71a Code	
		Phone Number	State Fax Number (if appli	Zip Code	
	B.	Determinations			
	1.	I request the Leicester make the following of Conservation Commission	determination(s). Cl	neck any that apply:	
		a. whether the area depicted on plan(s) and/or map(s) refe jurisdiction of the Wetlands Protection Act.	erenced below is an	area subject to	
		b. whether the boundaries of resource area(s) depicted o below are accurately delineated.	p(s) referenced		
		c. whether the work depicted on plan(s) referenced below i	s subject to the Wet	lands Protection Act.	
		d. whether the area and/or work depicted on plan(s) refere of any municipal wetlands ordinance or bylaw of:	enced below is subje	subject to the jurisdiction	
		Name of Municipality			
		 e. whether the following scope of alternatives is adequated depicted on referenced plan(s). 	e for work in the Riv	verfront Area as	



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C. Project Description

184 River ST Ro Street Address City/Tot	chelate	MASS					
ou que la companya de	wn	,					
43 Assessors Map/Plat Number Parcel/I	Lot Number						
·							
b. Area Description (use additional paper, if necessary):							
Next Too septic From property Lin							
From septia To 25' No work Ze	one at	waters ed					
•							
		Water					
Plan and/or Map Reference(s):							

Title		Date					
Title		Date					
Title		Date					
	/-> -£						
. Work Description (use additional paper and/or provide plan(s) of work, if necessary):							
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A selection and all struct a	emove Ro	cki and					
ROMPURE STUMPS, UND DIE STUMPS, K	Remove, Stumps, and old stumps, Remove Rocki and						
Remove, Stumps, and old Stumps, K		1 Side					
Bild Rock wall For around scopic of	1 property						
Bild Rock wall for around scotic or		m and sco					
Bild Rock wall For around scopfic on grade Lot To Level with grave		m and sco					
Bild Rock wall for around supfic or		m and sco					
Bild Rock wall for around supfic or		m and sce					
Bild Rock wall for around supfic or		m and sce					
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C. Project Description (cont.)

_	Work will be done Futher Than The 25" NO Touch					
-	ZONE From wetlands area.					
 1	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					
I	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					
1	New agriculture or aquaculture project					
	Public project where funds were appropriated prior to 8/7/96					
İ	Project on a lot shown on an approved, definitive subdivision plan where there is a recorded de 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					
1	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.					
1	 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:	
A Chad Accounte Name 184 River St Mailing Address	•
184 River St	
Mailing Address	
Rochdale City/Town	. ~ 1/3
State	<u>01542</u> Zip Code
Signatures:	
I also understand that notification of this Request in accordance with Section 10.05(3)(b)(1) of the	will be placed in a local newspaper at my expense Wetlands Protection Act regulations.
Signature of Applicant	
7	
Cignature of Pennacentative (if any)	Date