

Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Wetlands

LEICESTER

City/Town

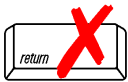
WPA Form 1- Request for Determination of Applicability

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 key.



1. Applicant:

US Bank Trust NA

Name

danielle.therrien@yahoo.com

E-Mail Address

3701 Regent Blvd

Mailing Address

Irving

City/Town

TX

State

75063

Zip Code

508-344-3481

Phone Number

Fax Number (if applicable)

2. Representative (if any):

Alpha Omega Engineering

Firm

Raouf

Contact Name

info@alphaomegaeng.net

E-Mail Address

25 Highland View Dr

Mailing Address

Sutton, MA

City/Town

MA

State

01590

Zip Code

508-865-9551

Phone Number

508-499-6213

Fax Number (if applicable)

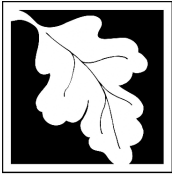
B. Determinations

1. I request the Leicester make the following determination(s). Check any that apply:
Conservation Commission

- ☐ a. whether the **area** depicted on plan(s) and/or map(s) referenced below is an area subject to jurisdiction of the Wetlands Protection Act.
- ☐ b. whether the **boundaries** of resource area(s) depicted on plan(s) and/or map(s) referenced below are accurately delineated.
- ☒ c. whether the **work** depicted on plan(s) referenced below is subject to the Wetlands Protection Act.
- ☐ d. whether the area and/or work depicted on plan(s) referenced below is subject to the jurisdiction of any **municipal wetlands ordinance** or **bylaw** of:

Name of Municipality

- ☐ e. whether the following **scope of alternatives** is adequate for work in the Riverfront Area as depicted on referenced plan(s).



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

C. Project Description

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

<u>209 Clark Street</u>	<u>Leicester</u>
Street Address	City/Town
<u>37</u>	<u>C8 0</u>
Assessors Map/Plat Number	Parcel/Lot Number

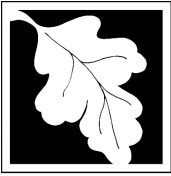
- b. Area Description (use additional paper, if necessary):
An existing single family home with a failed septic system within 100' of the wetlands

- c. Plan and/or Map Reference(s):

<u>Septic system repair plan</u>	<u>3/7/2023</u>
Title	Date
_____	_____
Title	Date
_____	_____
Title	Date

2. a. Work Description (use additional paper and/or provide plan(s) of work, if necessary):

The applicant proposes to replace the existing failed septic system (in groundwater) within the 100 foot buffer form the edge of the wetlands. However, proposed septic system is out side of the 50' buffer zone.



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

C. Project Description (cont.)

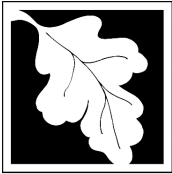
b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary).

failed septic system for an Existing single family home. Proposed septic system is outside of the 50' buffer from existing wetland line.

3. 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.)



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

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:

US Bank Trust NA

Name

3701 Regent Blvd

Mailing Address

Irving

City/Town

TX

State

75063

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

Danielle Rrs

Signature of Representative (if any)

3/8/2023

Date