

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 Boxford Wetlands Protection Bylaw Town Code c 192 & 375

A. General Information

Important: When filling out 1. forms on the computer, use only the tab key to move your cursor - do not use the return





1.	Applicant:				
	Name	E-Mail Address			
	Mailing Address				
	City/Town	State	Zip Code		
	Phone Number	Fax Number (if a	applicable)		
2.	Representative (if any):				
	Firm				
	Contact Name	E-Mail Address			
	Mailing Address				
	City/Town	State	Zip Code		
	Phone Number	Fax Number (if a	applicable)		
В.	. Determinations				
1.	I request the 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) depict below are accurately delineated.	ted on plan(s) and/or	map(s) referenced		
	c. whether the work depicted on plan(s) referenced be	elow is subject to the V	Vetlands Protection Act.		
	d. whether the area and/or work depicted on plan(s) r of any municipal wetlands ordinance or bylaw of:	and/or work depicted on plan(s) referenced below is subject to the jurisdiction etlands ordinance or bylaw of:			
	Name of Municipality				
 e. whether the following scope of alternatives is adequate for work in the Riverfront Area depicted on referenced plan(s). 					



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C. Project Description

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Assessors Map/Plat Number	Parcel/Lot Number
b. Area Description (use addition	al paper, if necessary):
	:
c. Plan and/or Map Reference(s)	
c. Plan and/or Map Reference(s)	
	Date
Fitle	Date
c. Plan and/or Map Reference(s) Title Title	



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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

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C. Project Description (cont.)

	necessary).		
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.)		



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Name and address of the property owner:

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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					
Mailing Address					
City/Town					
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				