



Enter your transmittal number

X287998

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml>

Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application. Copy 2 must accompany your fee payment. Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

MassDEP
P.O. Box 4062
Boston, MA
02211

* Note:
For BWSC Permits,
enter the LSP.

A. Permit Information

WPA - FORM 3A

NOTICE OF INTENT

1. Permit Code: 7 or 8 character code from permit instructions

2. Name of Permit Category

REPLACEMENT OF A EXISTING SANITARY DISPOSAL SYSTEM

3. Type of Project or Activity

B. Applicant Information - Firm or Individual

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

HOXHA

CHRISTINE

2. Last Name of Individual

3. First Name of Individual

4. MI

148 DODGE STREET - UNIT#2

5. Street Address

BEVERLY

MA

01915

978-810-8240

6. City/Town

7. State

8. Zip Code

9. Telephone #

10. Ext. #

11. Contact Person

12. e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

CHRISTINE HOXHA

1. Name of Facility, Site Or Individual

57 STONECLEAVE ROAD

2. Street Address

BOXFORD

MA

01921

978-810-8240

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. DEP Facility Number (if Known)

9. Federal I.D. Number (if Known)

10. BWSC Tracking # (if Known)

D. Application Prepared by (if different from Section B)*

ENGINEERING LAND SERVICES, LLC

1. Name of Firm Or Individual

P.O. BOX 41

2. Address

WEST NEWBURY

MA

01985

978-815-6744

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

9. LSP Number (BWSC Permits only)

E. Permit - Project Coordination

1. Is this project subject to MEPA review? yes no
If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

F. Amount Due

Special Provisions:

- Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).
There are no fee exemptions for BWSC permits, regardless of applicant status.
- Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).
- Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).
- Homeowner (according to 310 CMR 4.02).

DEP Use Only

Permit No:

Rec'd Date:

Reviewer:

Check Number

Dollar Amount

Date



Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Wetlands

Provided by MassDEP:

WPA Form 3 – Notice of Intent

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

MassDEP File Number _____
 Document Transaction Number
BOXFORD
 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):

57 STONECLEAVE ROAD
 a. Street Address BOXFORD 01921
 b. City/Town c. Zip Code
 Latitude and Longitude: 42.657480 -71.030487
 d. Latitude e. Longitude
TAX MAP 31 BLOCK 01
 f. Assessors Map/Plat Number LOT 14
 g. Parcel /Lot Number

2. Applicant:

CHRISTINE HOXHA
 a. First Name b. Last Name
 c. Organization
148 DODGE STREET - UNIT#2
 d. Street Address
BEVERLY MA 01915
 e. City/Town f. State g. Zip Code
978-810-8240
 h. Phone Number i. Fax Number j. Email Address

3. Property owner (required if different from applicant): Check if more than one owner

CHRISTINE HOXHA
 a. First Name b. Last Name
 c. Organization
57 STONECLEAVE ROAD
 d. Street Address
BOXFORD MA 01921
 e. City/Town f. State g. Zip Code
978-810-8240
 h. Phone Number i. Fax Number j. Email address

4. Representative (if any):

ROBERT GRASSO
 a. First Name b. Last Name
ENGINEERING LAND SERVICES, LLC
 c. Company
P.O.BOX 41
 d. Street Address
WEST NEWBURY MA 01985
 e. City/Town f. State g. Zip Code
978-815-6744 978-462-6800
 h. Phone Number i. Fax Number MASSPLSRG@AOL.COM
 j. Email address

5. Total WPA Fee Paid (from NOI Wetland Fee Transmittal Form):

\$110 + \$200(LOCAL) \$42.50 \$67.50 + \$200.00(LOCAL)
 a. Total Fee Paid b. State Fee Paid c. City/Town Fee Paid



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

BOXFORD

City/Town

A. General Information (continued)

6. General Project Description:

REPLACEMENT OF AN EXISTING SANITARY DISPOSAL SYSTEM

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

- 1. Single Family Home
- 2. Residential Subdivision
- 3. Commercial/Industrial
- 4. Dock/Pier
- 5. Utilities
- 6. Coastal engineering Structure
- 7. Agriculture (e.g., cranberries, forestry)
- 8. Transportation
- 9. 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:

ESSEX SOUTH

a. County

37623

c. Book

b. Certificate # (if registered land)

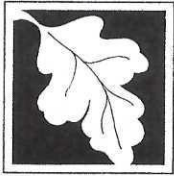
36

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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number _____

Document Transaction Number _____

BOXFORD

City/Town

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 _____	2. square feet _____
	3. cubic yards dredged _____	

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet _____	2. square feet _____
	3. cubic feet of flood storage lost _____	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. <input type="checkbox"/> 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:

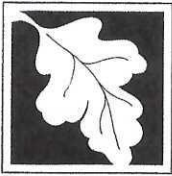
a. total square feet _____ b. square feet within 100 ft. _____ c. square feet between 100 ft. and 200 ft. _____

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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

BOXFORD

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.

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

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

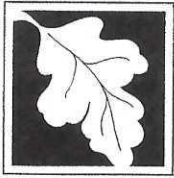
a. square feet of BVW

b. square feet of Salt Marsh

5. Project Involves Stream Crossings

a. number of new stream crossings

b. number of replacement stream crossings



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

BOXFORD

City/Town

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 Notice of Intent – 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.

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

08-01-2017
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 9,980 S.F./ 18.3%
percentage/acreage

(b) outside Resource Area 0
percentage/acreage

2. Assessor's Map or right-of-way plan of site

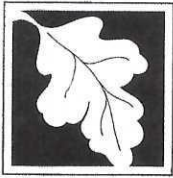
2. Project plans for entire project site, including wetland resource areas and areas outside of wetlands jurisdiction, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work **

(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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

BOXFORD

City/Town

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

(c) MESA filing fee (fee information available at http://www.mass.gov/dfwele/dfw/nhosp/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/nhosp/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:

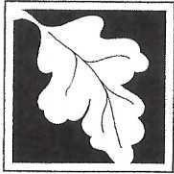
South Shore - Cohasset to Rhode Island border, and the Cape & Islands:

North Shore - Hull to New Hampshire border:

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

Division of Marine Fisheries -
North Shore Office
Attn: Environmental Reviewer
30 Emerson Avenue
Gloucester, MA 01930
Email: 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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

BOXFORD

City/Town

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.

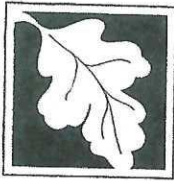
D. Additional Information

- 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.



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

BOXFORD

City/Town

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.

SANITARY DISPOSAL SYSTEM UPGRADE PLAN

a. Plan Title

ENGINEERING LAND SERVICES, LLC

ROBERT M. GRASSO/BRIAN J. FARMER

b. Prepared By

c. Signed and Stamped by

06-15-2021

1" = 30'

d. Final Revision Date

e. Scale

06-15-2021

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:

429 & 430

06-18-2021

2. Municipal Check Number

3. Check date

428

06-18-2021

4. State Check Number

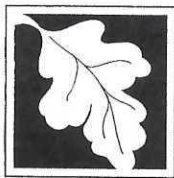
5. Check date

CHRISTINE

HOXHA

6. Payor name on check: First Name

7. Payor name on check: Last Name



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number



BOXFORD

City/Town

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.

	6-18-21
1. Signature of Applicant	2. Date
3. Signature of Property Owner (if different)	4. Date
	6-18-21
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:

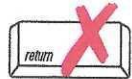
If the applicant has checked the "yes" box in any part of Section C, Item 3, above, refer to that section and the Instructions for additional submittal requirements.

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.



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

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:

57 STONECLEAVE ROAD

a. Street Address

428

c. Check number

BOXFORD

b. City/Town

\$42.50

d. Fee amount

2. Applicant Mailing Address:

CHRISTINE

a. First Name

HOXHA

b. Last Name

c. Organization

148 DODGE STREET - UNIT#2

d. Mailing Address

BEVERLY

e. City/Town

978-810-8240

h. Phone Number

MA

f. State

01915

g. Zip Code

i. Fax Number

j. Email Address

3. Property Owner (if different):

CHRISTINE

a. First Name

HOXHA

b. Last Name

c. Organization

57 STONECLEAVE ROAD

d. Mailing Address

BOXFORD

e. City/Town

978-810-8240

h. Phone Number

MA

f. State

01921

g. Zip Code

i. Fax Number

j. Email Address

To calculate filing fees, refer to the category fee list and examples in the instructions for filling out WPA Form 3 (Notice of Intent).

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.

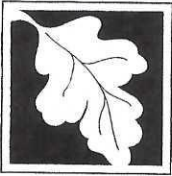
Step 2/Number of Activities: Identify the number of each type of activity.

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.



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
REPLACEMENT OF AN EXISTING SANITARY DISPOSAL SYSTEM	CAT 1(E)	\$110.00	\$110.00
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Step 5/Total Project Fee: \$110.00

Step 6/Fee Payments:

Total Project Fee:	\$110.00
State share of filing Fee:	\$42.50
City/Town share of filling Fee:	\$67.50 +
	\$200.00(LOCAL)

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.)



CHRISTINE HOXHA
57 STONECLEAVE ROAD
BOXFORD, MA 01921

428

62-7611/311

DATE 6-18-21



PAY TO THE
ORDER OF

Commonwealth of MA

\$ 4250

Forty Two +

50
100

DOLLARS



Photo
Safe
Deposit®
Details on back



MEMO

OK H

⑆03⑆⑆76⑆⑆10⑆ 36007682477⑈ 0428



CHRISTINE HOXHA
57 STONECLEAVE ROAD
BOXFORD, MA 01921

429

62-7611/311

DATE 6-18-21



PAY TO THE
ORDER OF

Town of Buxford

\$ 67.50

Sixty Seven -

50
100

DOLLARS



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Details on back



MEMO

OK H

⑆03⑆⑆76⑆⑆10⑆ 36007682477⑈ 0429



CHRISTINE HOXHA
57 STONECLEAVE ROAD
BOXFORD, MA 01921

430

62-7611/311

DATE 6-18-21



PAY TO THE
ORDER OF

Town of Buxford

\$ 200.00

Two Hundred +

00
100

DOLLARS



Photo
Safe
Deposit®
Details on back



MEMO

Local Fee

OK H

⑆03⑆⑆76⑆⑆10⑆ 36007682477⑈ 0430

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Wilmington, MA 01887

Certified Mail Fee	\$3.60
Extra Services & Fees (check box, add fee as appropriate)	\$2.85
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$3.00

Total Postage \$9.45

Sent To D.E.P. - NORTHEAST OFFICE
Street and A 205 B LOWELL STREET
City, State, Z WILMINGTON, MA 01887

PS Form 38

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JUN 18 2021
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Westborough, MA 01581

Certified Mail Fee	\$3.60
Extra Services & Fees (check box, add fee as appropriate)	\$2.85
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$3.00

Total Postage \$6.45

Sent To N.H.E.S.P. 5
Division of Fisheries & Wildlife
Street 1 Rabbit Hill Road
City, State Westborough, MA 01581

PS Form

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JUN 18 2021
Postmark Here

7015 3010 0001 1995 9052

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Boston, MA 02211

Certified Mail Fee	\$3.60
Extra Services & Fees (check box, add fee as appropriate)	\$2.85
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage \$7.00

Sent To D.E.P.
Street and P.O. BOX 4062
City, State BOSTON, MA 02211

PS Form

0922
JUN 18 2021
Postmark Here

Boxford Conservation Commission
Application Checklist-Notice of Intent (NOI)

This checklist is designed to assist the applicant in preparing a complete Notice of Intent application. One completed copy of the checklist should be submitted with the application. One (1) original and (7) copies of the NOI forms, plans and appurtenant data listed below are required to be submitted for a complete application

The following are required as part of a complete NOI application and are attached:

- Attached** ✓ Completed Notice of Intent form (available from the Conservation Office or at <http://www.mass.gov/dep/appkits/wpaform3.pdf>). (Note: A copy of a complete NOI must also be mailed to the MassDEP NERO, 205B Lowell Street, Wilmington, MA 01887.)

- Attached** ✓ Site Plan. See next page for required elements of plan.

- Attached** ✓ List of abutters within 250' of the project parcel(s) (and all pond abutters if applicable), prepared and certified by the Town Assessor's Office. (Note: A notice of public hearing will be prepared by the Conservation office and provided to the applicant when the application is submitted. At the public hearing, the applicant must provide evidence that the notice was mailed to each of the persons on the certified abutters list.)

- Attached** ✓ A copy of a check made out in the correct amount to the Department of Environmental Protection and a copy of a completed State Wetlands Fee Transmittal Form. (Note: the applicant is responsible for mailing this check along with a completed State Wetlands Fee Transmittal Form to the DEP "Lockbox" at Box 4062, Boston MA 02211.)

- Attached** ✓ A check for local filing fees made out in the correct amount to the "Town of Boxford".

- ✓ **Attached** **N/A** Proof of mailing or proof of hand delivery to the Natural Heritage and Endangered Species Program, if applicable.

- ✓ **Attached** **N/A** Evidence that all other Boxford Bylaw permit applications relevant to the project have been filed, if applicable (e.g., Board of Health, Zoning Board of Appeals). Please list all other Bylaw permit filings:
_____.

The following must be shown on the site plan attached to the application:

- Shown** ✓ All appropriate plan requirements listed in Section 375-5(A)(1)(b) of the Town of Boxford Wetland Protection Bylaw Regulations.
- Shown** ✓ The signature and stamp of a Registered Professional Land Surveyor, Registered Sanitarian, or Registered Professional Engineer, and the identity of the firm/person that delineated the wetland resource area.
- Shown** ✓ Boundaries of all wetland resource areas (e.g., bordering vegetated wetland, bordering land subject to flooding). All demarcation flags must be located by survey in the field and shown on the plan.
- Shown** ✓ All wetland resource area setback lines (e.g., 100' Limit of Jurisdiction, 200' Riverfront, 25' No Disturb, 75' No Build).
- Shown** ✓ Existing contour information and proposed grading.
- Shown** ✓ Existing site conditions and proposed changes including structures, pavement, landscaping, underground utilities and building overhangs. (Note: it may be necessary to show areas outside of the limits of jurisdictional wetland area in order to provide adequate information for the Commission to properly review the project.)
- Shown** ✓ All erosion / sedimentation control measures.
- Shown** ✓ Pre- and post-development overstory tree line within jurisdictional area, and a calculation of the percent removal of overstory trees within the "discretionary cutting area" (see Section 375-4(A) and Section 375-98(D) (2) of the Boxford Wetlands Protection Regulations).

N/A **Applications subject to the DEP Stormwater Management Policy must include the following:** *(The plan and supporting documentation must also be mailed to the DEP Northeast Office and the Boxford DPW)*

- Attached** Completed DEP Stormwater Management Form.
- Attached** Stormwater & flood calculations using the Cornell Atlas rainfall estimates, prepared by a Professional Engineer.
- Attached** Operations and Maintenance Plan.
- Attached** A stormwater management plan showing stormwater management features highlighted in separate colors, per section 375-5(A)(1)(d) of the Boxford Wetlands Protection Bylaw Regulations.

3/17/2011

Boxford ConsCom fees adopted 3/17/2011

Fee Category	Fee subcategory	Former Fee	Fee adopted 3/17/2011
Request for Determination of Applicability		\$50.00	\$100.00
Notice of Intent			
	* Addition/Alteration	\$100.00	\$200.00
	New Single Family House	\$400.00	\$1,000.00
	Each Crossing (road intermittent)	\$400.00	\$1,000.00
	Each Crossing (road perennial)	\$400.00	\$2,000.00
	Each Crossing (driveway perennial)	\$400.00	\$1,000.00
	Each Crossing (driveway intermittent)	\$400.00	\$400.00
	Subdivisions (first 1500' of road, +2\$/lf after)	\$1,500.00	\$3,000.00
	Wetland Resource Alteration	.50 sq ft	.50 sq ft
	Bank Alteration	.50 lin ft	.50 lin ft
	Boundary Verification (\$25/100' after 100')	\$25/100' after	\$50/100' after
ANRAD (\$100 + \$25/100' after 100')		\$100+\$25/	\$200+\$50/
Certificate of Compliance (w/ 1 yr)		\$50.00	\$50.00
Certificate of Compliance (after 1 yr)		\$50.00	\$100.00
Partial Certificate of Compliance		\$50.00	\$50.00
Amended Order of Conditions		\$50.00	\$400.00
Extension Permit		\$100.00	\$150.00
Standard Request for Written Project Status		\$100.00	\$100.00
Expedited Request for Written Project Status		\$200.00	\$200.00
Affidavit		\$100.00	\$200.00
Determination of Negligible Impact		\$50.00	\$50.00
Emergency Certification		\$0.00	\$50.00
Site Visit without Application (non-owner)		\$25.00	\$50.00
Site Visit without Application (owner)		\$25.00	\$25.00
Soil Policy Fee		\$0.00	\$50.00

W:\ConsCom Publications\Bylaw and Regulations\Bylaw-Reg Changes\Fee Changes 3-17-2011\Fee Changes 3-17-2011.xls