



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
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):

63 PYE BROOK LANE BOXFORD 01921
 a. Street Address b. City/Town c. Zip Code

Latitude and Longitude: _____
 d. Latitude e. Longitude

MAP 30 LOT 34 _____
 f. Assessors Map/Plat Number g. Parcel /Lot Number

2. Applicant:

ROBERT MILLER
 a. First Name b. Last Name

_____ c. Organization
63 PYE BROOK LANE
 d. Street Address

BOXFORD MA 01921
 e. City/Town f. State g. Zip Code

(781)258-6045 _____
 h. Phone Number i. Fax Number j. Email Address

3. ^{h. Phone Number} 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):

DANIEL JOHNSON
 a. First Name b. Last Name

DSD, INC.
 c. Company

PO BOX 2406
 d. Street Address

S. HAMILTON MA 01982
 e. City/Town f. State g. Zip Code

(978) 768-7600 _____
 h. Phone Number i. Fax Number j. Email address
johnsondanb@gmail.com

5. ^{h. Phone Number} Total WPA Fee Paid (from NOI Wetland Fee Transmittal Form):

110 42.50 67.50
 a. Total Fee Paid b. State Fee Paid c. City/Town Fee Paid



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A. General Information (continued)

6. General Project Description:

REPLACE FAILED SEPTIC SYSTEM WITH A NEW TITLE 5 SEPTIC SYSTEM USING ALTERNATIVE TECHNOLOGY

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

- 1. Single Family Home *(NEW SEPTIC SYSTEM)*
- 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

13128

b. Certificate # (if registered land)

472

c. Book

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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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. <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 _____

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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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
	<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 BVW	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

- 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**

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*

- Percentage/acreage of property to be altered:

(a) within wetland Resource Area

_____ percentage/acreage

(b) outside Resource Area

_____ percentage/acreage

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

- 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 <https://www.mass.gov/ma-endangered-species-act-mesa-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 <https://www.mass.gov/how-to/how-to-file-for-a-mesa-project-review>).

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, <https://www.mass.gov/service-details/exemptions-from-review-for-projectsactivities-in-priority-habitat>; 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
836 South Rodney French Blvd.
New Bedford, MA 02744
Email: dmf.envreview-south@mass.gov

Division of Marine Fisheries -
North Shore Office
Attn: Environmental Reviewer
30 Emerson Avenue
Gloucester, MA 01930
Email: dmf.envreview-north@mass.gov

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.

c. Is this an aquaculture project?

d. Yes No

If yes, include a copy of the Division of Marine Fisheries Certification Letter (M.G.L. c. 130, § 57).



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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.

- 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.)
- 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.

SUBSURFACE SEWAGE DISPOSAL SYSTEM (DWG# J-2699)

a. Plan Title

DSD, INC.

DANIEL B. JOHNSON, R.S.

b. Prepared By

5/18/21

c. Signed and Stamped by

1" = 20'

d. Final Revision Date

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:

2. Municipal Check Number

3. Check date

4. State Check Number

5. Check date

6. Payor name on check: First Name

7. Payor name on check: Last Name



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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.

Robt Smith
1. Signature of Applicant

6/3/2021
2. Date

3. Signature of Property Owner (if different)

6/2/21
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.



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:

63 PYE BROOK LANE BOXFORD
 a. Street Address b. City/Town

 c. Check number d. Fee amount

2. Applicant Mailing Address:

ROBERT MILLER
 a. First Name b. Last Name

 c. Organization
63 PYE BROOK LANE
 d. Mailing Address
BOXFROD MA 01921
 e. City/Town f. State g. Zip Code
(781) 258-6045
 h. Phone Number i. Fax Number 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).

DOMESTIC SEPTIC DESIGN, INC.

P.O. Box 2406

S. Hamilton, MA 01982

TEL: (978) 768-7600

johnsondanb@gmail.com

Daniel B. Johnson, R.S., C.S.E.

June 2, 2021

RE: Abutter Notification (Massachusetts Wetland Protection Act)
Septic System Repair
63 Pye Brook Lane, Boxford

Dear Abutter:

Per the requirements of the second paragraph of the Massachusetts General Laws Chapter 131, Section 40, you are hereby notified that the septic system repair at the above referenced site is located within the 100 foot buffer of a wetland.

The proposed leaching area is located 101 feet from the wetland.

The proposed septic tank is located 89 feet from the wetland.

You can contact me or the Boxford Conservation Commission regarding the date of the public hearing for this matter at (978) 887-6000 X-181.

I thank you in advance for your attention to this matter.

Sincerely yours,


Daniel B. Johnson, President
DSD, Inc.

MAGNER, PETER
MAGNER, COLLEEN
56 PYE BROOK LN
BOXFORD, MA 01921

COX PAUL E
COX ANDREA
64 PYE BROOK LN
BOXFORD, MA 01921

KARIMI JUSTIN
KARIMI HEATHER
58 PYE BROOK LN
BOXFORD, MA 01921

FRANCIS ROSS A
FRANCIS LISA A
27 JANES RD
BOXFORD, MA 01921

BROWN THOMAS W TE
JAN E BROWN
71 PYE BROOK LANE
BOXFORD, MA 01921

MANTON STEPHEN J TE
MANTON KIRSTEN N
9 JANES RD
BOXFORD, MA 01921

HAYES GRAHAM E
HAYES STACY M
17 JANES RD
BOXFORD, MA 01921

LAPATOVICH WALTER P TE
LAPATOVICH PENNY L
51 PYE BROOK LN
BOXFORD, MA 01921

SKINNION ROBERT M TE
SKINNION MARY ANN
55 PYE BROOK LN
BOXFORD, MA 01921

TILTON III FREDERICK A TE
AMATO TILTON MICHELLE L
65 PYE BROOK LN
BOXFORD, MA 01921

MILLER ROBERT S TE
MILLER MARCI L
63 PYE BROOK LN
BOXFORD, MA 01921

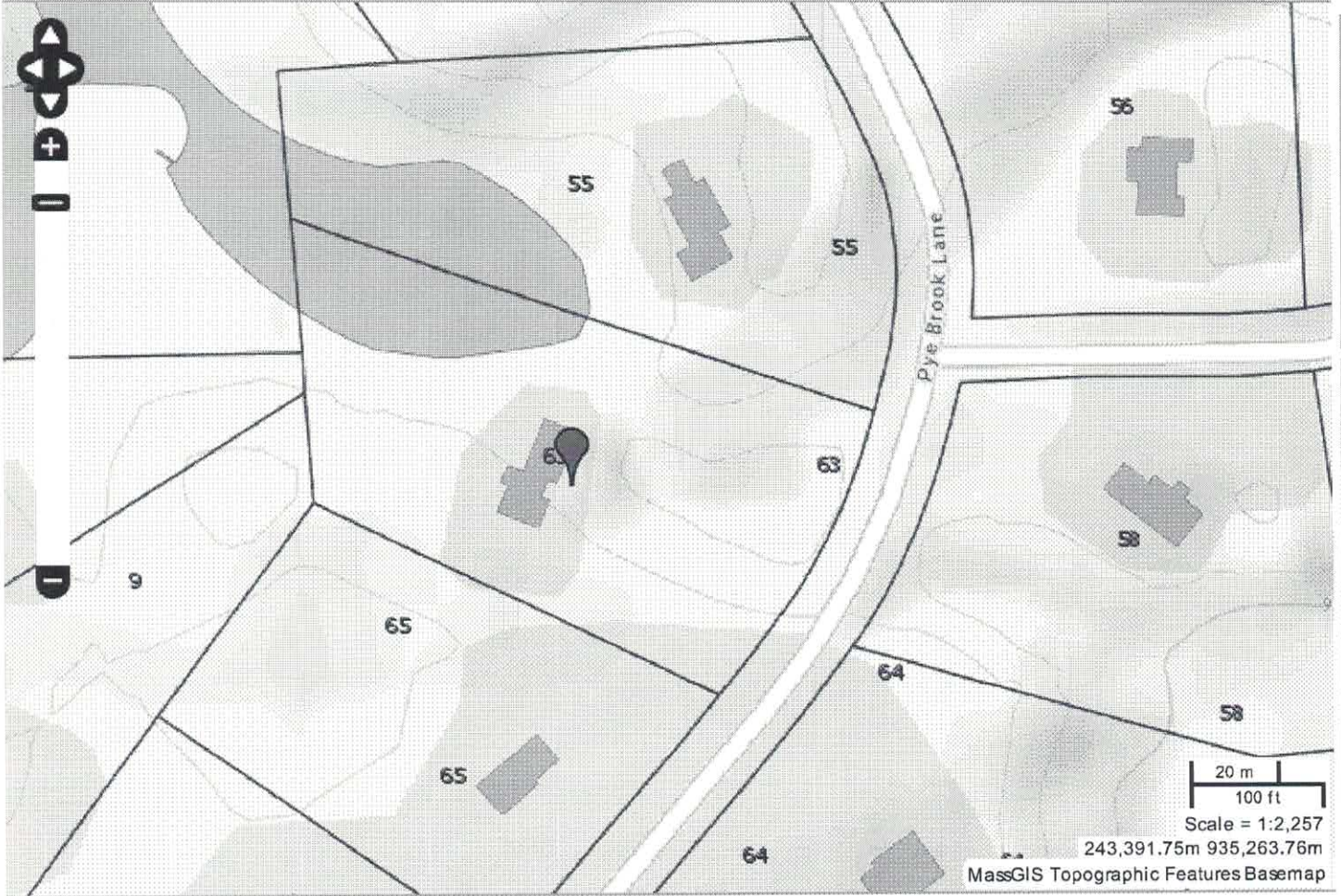
SAMPSON DAVID W
SAMPSON KATHY M
72 PYE BROOK LN
BOXFORD, MA 01921

63 Pye Brook Lane, Boxford

Zoom to a town

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Basemaps

ROBERT S MILLER
MARC L MILLER
63 PYE BROOK LN
BOXFORD, MA 01921-1831

2268

53-8048/2113

3 June 2021
Date

Pay to the Order of Town of Boxford | \$ 200.00
Two Hundred and ⁰⁰/₁₀₀ Dollars  Photo Safe Deposit® Details on back



For Local NO1 fee

Robt S Miller MP

⑆ 211380483⑆


501212800⑈ 2268

ROBERT S MILLER
MARC L MILLER
63 PYE BROOK LN
BOXFORD, MA 01921-1831

2269

53-8048/2113

3 June 2021
Date

Pay to the Order of Town of Boxford | \$ 67.50
Sixty Seven and ⁵⁰/₁₀₀ Dollars  Photo Safe Deposit® Details on back



For _____

Robt S Miller MP

⑆ 211380483⑆


501212800⑈ 2269

ROBERT S MILLER
MARC L MILLER
63 PYE BROOK LN
BOXFORD, MA 01921-1831

2270

53-8048/2113

3 June 2021
Date

Pay to the Order of Commonwealth of Massachusetts | \$ 42.50
Forty Two and ⁵⁰/₁₀₀ Dollars  Photo Safe Deposit® Details on back



For _____

Robt S Miller MP

⑆ 211380483⑆

501212800⑈ 2270