



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

Boxford

City/Town

## WPA Form 3 – Notice of Intent

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40  
& Under the Town of Boxford's Wetland Protection Bylaw

**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):

10 King George Drive

a. Street Address

Boxford

b. City/Town

01921

c. Zip Code

Latitude and Longitude:

42° 41' 16" N

d. Latitude

70° 58' 51" W

e. Longitude

Map 20, Block 5

f. Assessors Map/Plat Number

Lot 31

g. Parcel /Lot Number

2. Applicant:

Gail A. Lynch, Trustee

a. First Name

Gail A. Lynch Trust

b. Last Name

c/o The Morin-Cameron Group, Inc.

c. Organization

66 Elm Street

d. Street Address

Danvers

e. City/Town

MA

f. State

01923

g. Zip Code

978-777-8586

h. Phone Number

i. Fax Number

John@morincameron.com

j. Email Address

3. 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):

John

a. First Name

Morin

b. Last Name

The Morin-Cameron Group, Inc.

c. Company

66 Elm Street

d. Street Address

Danvers

e. City/Town

MA

f. State

01923

g. Zip Code

978-777-8586

h. Phone Number

i. Fax Number

John@morincameron.com

j. Email address

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

\$635.00

a. Total Fee Paid

\$42.50

b. State Fee Paid

\$592.50

c. City/Town Fee Paid



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**A. General Information (continued)**

6. General Project Description:

The project involves the replacement of a failed septic system. Work within the buffer zone includes installation of a new septic tank, pump chamber, Presby Enviro-Septic Leaching Facility, regrading and relocation of utilities.

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

- |   |   |
|---|---|
| 1. <input checked="" type="checkbox"/> Single Family Home             | 2. <input type="checkbox"/> Residential Subdivision       |
| 3. <input type="checkbox"/> Commercial/Industrial                     | 4. <input type="checkbox"/> Dock/Pier                     |
| 5. <input type="checkbox"/> Utilities                                 | 6. <input type="checkbox"/> Coastal engineering Structure |
| 7. <input type="checkbox"/> Agriculture (e.g., cranberries, forestry) | 8. <input type="checkbox"/> Transportation                |
| 9. <input type="checkbox"/> 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 CMR10.24(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:

So. Essex

a. County

30300

c. Book

b. Certificate # (if registered land)

409

d. Page Number

**B. Buffer Zone & Resource Area Impacts (temporary & permanent)**

- 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.
- 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 _____	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.  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.



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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

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](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

MassGIS 2022

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

percentage/acreage

(b) outside Resource Area

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 <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:

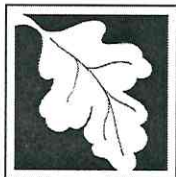
Division of Marine Fisheries -  
Southeast Marine Fisheries Station  
Attn: Environmental Reviewer  
836 South Rodney French Blvd.  
New Bedford, MA 02744  
Email: [dmf.envreview-south@mass.gov](mailto:dmf.envreview-south@mass.gov)

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

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.



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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.

Sanitary Disposal System Repair Plan in Boxford, MA, 10 King George Drive, prepared for Michael & Gail Lynch

The Morin-Cameron Group, Inc.

John M. Morin, PE

b. Prepared By

c. Signed and Stamped by

3/2/2022

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:

2970

2. Municipal Check Number

3/14/2022

3. Check date

2969

4. State Check Number

3/14/2022

5. Check date

The Morin-Cameron Group, Inc.

6. Payor name on check: First Name

7. Payor name on check: Last Name



The Morin-Cameron Group, Inc.  
66 Elm Street  
Danvers, MA 01923

First Ipswich Bank  
Rowley, MA 01969  
53-471/113

2970

3/14/2022

PAY TO THE ORDER OF Town of Boxford

\$ 592.50

Five hundred ninety-two & 50/100

DOLLARS

MEMO Lynch #2845 - NOI fee

*Kathleen M. Molina*  
AUTHORIZED SIGNATURE



Location: 10 King George Drive, Boxford

The Morin-Cameron Group, Inc.  
66 Elm Street  
Danvers, MA 01923

First Ipswich Bank  
Rowley, MA 01969  
53-471/113

2969

3/14/2022

PAY TO THE ORDER OF Commonwealth of Massachusetts

\$ 42.50

Forty-two & 50/100

DOLLARS

MEMO Lynch #2845 - NOI fee

*Kathleen M. Molina*  
AUTHORIZED SIGNATURE



The Morin-Cameron Group, Inc.

2969



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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.

*Kathleen Molina, as authorized*

1. Signature of Applicant

*3/17/2022*

2. Date

3. Signature of Property Owner (if different)

*Kathleen Molina, The main - Cameron Gray, Inc.*

5. Signature of Representative (if any)

4. Date

*3/17/2022*

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.

Authorization Form

Re: 10 King George Drive, Boxford

I, ~~GAIL~~ Lynch authorize The Morin-Cameron Group, Inc. to sign any and all applications to the Town of Boxford on my behalf regarding the above-referenced property.

Gail A Lynch  
GAIL Lynch

7-13-21  
Date



**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:

10 King George Drive Boxford  
 a. Street Address b. City/Town  
2969 \$42.50  
 c. Check number d. Fee amount

2. Applicant Mailing Address:

Gail A. Lynch, Trustee Gail A. Lynch Trust  
 a. First Name b. Last Name  
c/o The Morin-Cameron Group, Inc.  
 c. Organization  
66 Elm Street  
 d. Mailing Address  
Danvers MA 01923  
 e. City/Town f. State g. Zip Code  
978-777-8586 John@morincameron.com  
 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).



**AFFIDAVIT OF SERVICE**

**Under the Massachusetts Wetlands Protection Act**

(to be submitted to Mass. DEP and the Conservation Commission  
when filing a Notice of Intent)

I, Kathleen Molina of The Morin-Cameron Group, Inc., hereby certify under the pains and penalties of perjury that on **March 17, 2022** I gave notification to abutters in compliance with the second paragraph of Massachusetts General Laws Chapter 131, Section 40, and the DEP Guide to Abutter Notification dated April 8, 1994, in connection with the following matter:

A Notice of Intent was filed under the Massachusetts Wetlands Protection Act by **Gail A. Lynch, Trustee of the Gail A. Lynch Trust** with the Town of **Boxford** Conservation Commission on **March 17, 2022** for property located at **10 King George Drive (Assessors Map 20, Block 5, Lot 31)**.

The form of the notification, and a list of the abutters to whom it was given and their addresses, are attached to this Affidavit of Service.

*Kathleen Molina*

Kathleen Molina  
The Morin-Cameron Group, Inc.  
66 Elm Street  
Danvers, MA 01923

*3/17/2022*

Date

**Notification to Abutters Under the  
Massachusetts Wetland Protection Act**

In accordance with the second paragraph of Massachusetts General Laws, Chapter 131, Section 40, you are hereby notified of the following:

- A. The name of the applicant is: **Gaily A. Lynch, Trustee – Gail A. Lynch Trust**
- B. The applicant has filed a **Notice of Intent** with the Conservation Commission for the municipality of **Boxford** seeking permission to remove, fill, dredge or alter an Area Subject to Protection under the Wetlands Protection Act (General Laws Chapter 131, Section 40).
- C. The address of the lot where the activity is proposed: **10 King George Drive**
- D. Copies of the Application may be examined & obtained at the **Conservation Office, 7A Spofford Road** between the hours of **8:30am** and **2pm** on the following days of the week **Monday-Thursday**. For more information call: **978-887-6000**
- E. Information regarding the date, time and place of the public hearing may be obtained from the **Conservation Office** by calling this number: **978-887-6000** between the hours of **8:30am** and **2pm** on the following days of the week: **Monday-Thursday**.

NOTE: Notice of the public hearing, including its date, time and place, will be published at least five (5) days in advance in the *Eagle Tribune*.

NOTE: Notice of the public hearing, including its date, time and place will be posted in the City or Town Hall not less than forty-eight (48) hours in advance.

NOTE: You also may contact your local Conservation Commission or the nearest Department of Environmental Protection Regional Office for more information about this application or the Wetlands Protection Act.

To contact MassDEP Northeast Region call: 978-694-3200

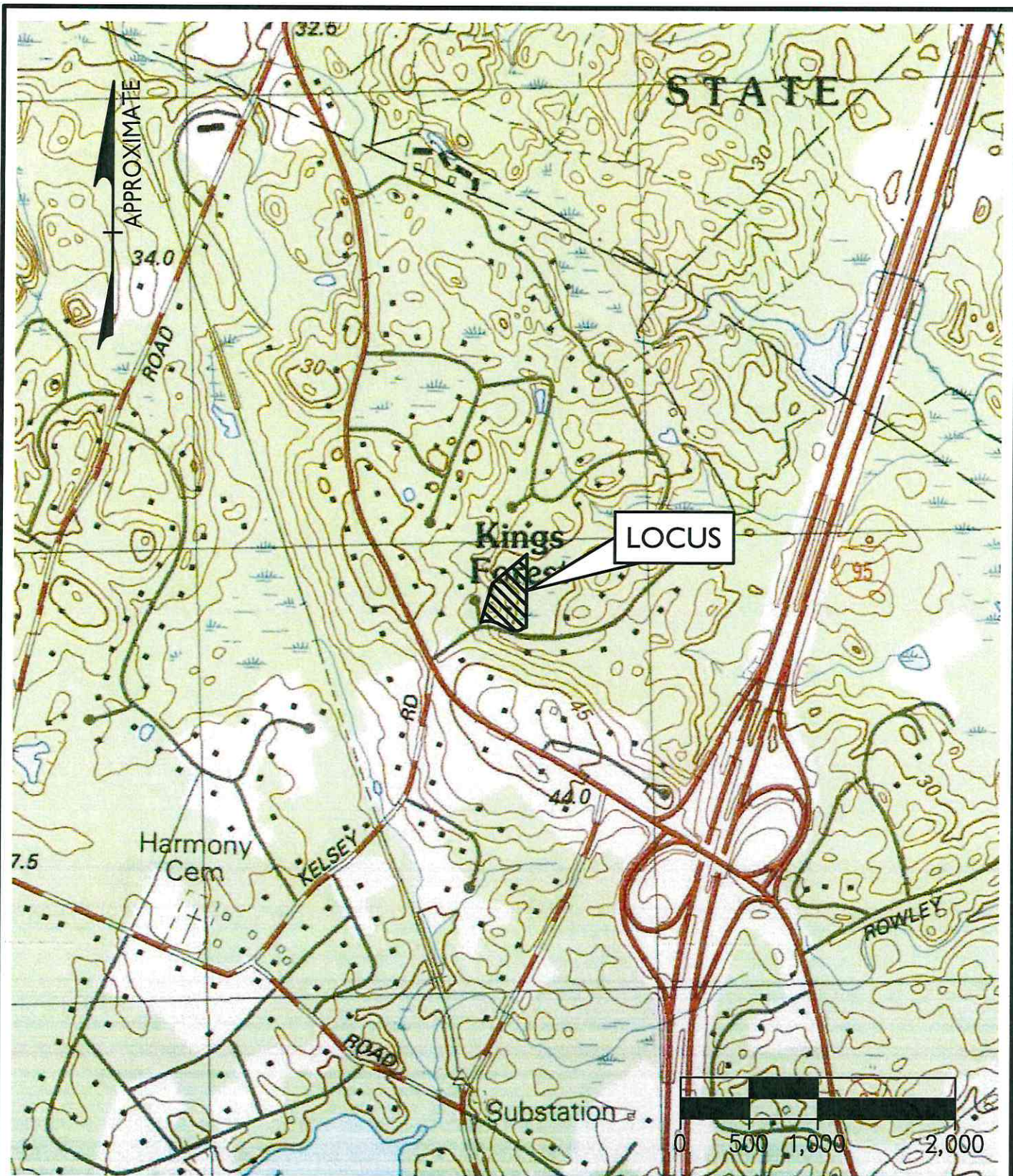
20-5-31 - 10 KING GEORGE DR, BOXFORD ABUTTERS LIST  
 CONSERVATION COMMISSION 250'

Parcel ID	Location	Owner	Owner 2	Owner Address	Owner City/Town	Owner State	Zip Code
20-03-09	93 KILLAM HILL RD	ERENSOY CERKKUT TE	JUDITH N ERENZOY	93 KILLAM HILL RD	BOXFORD	MA	01921
20-04-01	3 KING GEORGE DR	BRAUER ANDREW W & PAMELA P TE		3 KING GEORGE DR	BOXFORD	MA	01921
20-04-02	13 KING GEORGE DR	PLUMP MICHAEL	HARGRAVES ANN	13 KING GEORGE DR	BOXFORD	MA	01921
20-04-03	19 KING GEORGE DR	IZIDORO WESLEY SOUSA		19 KING GEORGE DR	BOXFORD	MA	01921
20-05-01	2 KING GEORGE DR	FOWLER DANA D TE	FOWLER MICHAEL	2 KING GEORGE DR	BOXFORD	MA	01921
20-05-19	3 KING JAMES CT	ORTH MARILYN E TR		3 KING JAMES CT	BOXFORD	MA	01921
20-05-20	2 KING JAMES CT	GRAF JOHN A & CYNTHIA A TRS		2 KING JAMES CT	BOXFORD	MA	01921
20-05-21	18 KING JOHN DR	RODGERS JOSEPH E	GRAF REALTY TRUST I	2 KING JAMES CT	BOXFORD	MA	01921
20-05-25	46 KING GEORGE DR	HIRSHON TODD	RODGERS NICOLE M	18 KING JOHN DR	BOXFORD	MA	01921
20-05-26	42 KING GEORGE DR	BOUCHARD BENJAMIN C	HIRSHON STEPHANIE	46 KING GEORGE DR	BOXFORD	MA	01921
20-05-27	34 KING GEORGE DR	CAISSIE CRYSTAL	BOUCHARD BECKY L	42 KING GEORGE DR	BOXFORD	MA	01921
20-05-28	30 KING GEORGE DR	CORBIN JAMES D TE	PURCELL WILLIAM III	34 KING GEORGE DR	BOXFORD	MA	01921
20-05-30	22 KING GEORGE DR	SOKOLOWSKI MICHAEL	CORBIN CORINNA B	30 KING GEORGE DR	BOXFORD	MA	01921
20-05-31	10 KING GEORGE DR	LYNCH GAIL ANN TRUSTEE	SOKOLOWSKI DENISE M	22 KING GEORGE DR	BOXFORD	MA	01921
20-05-32	3 KING WILLIAM CT	CWIK CYNTHIA A	GAIL A LYNCH TRUST	10 KING GEORGE DR	BOXFORD	MA	01921
20-05-33	4 KING WILLIAM CT	GUARNIERI GREGG L TE	GUARNIERI CHRISTINE M	3 KING WILLIAM CT	BOXFORD	MA	01921
				5 KING WILLIAM CT	BOXFORD	MA	01921

CERTIFIED COPY  
 01/05/2022

*Heather Thigault*





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USGS MAP  
10 KING GEORGE  
DRIVE  
IN  
BOXFORD, MA

DATE: MARCH 4, 2022

SCALE: 1" = 1,000'

**FIGURE #1**