

Massachusetts Department of Environmental ProtectionBureau of Resource Protection - Wetlands

WPA Form 1- Request for Determination of Applicability City/Town

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 Boxford Wetlands Protection Bylaw, Town Code Ch. 192 & 375

A. General Information

Applicant: Lavid > Louise Kress Name PO Box 83 Mailing Address West Box Ford		E-Mail Address	ss@comcast.net	
978 352	6116			
	any):		,	
Firm				
Contact Name		E-Mail Address		
Mailing Address				
City/Town		State	Zip Code	
Phone Number		Fax Number (if app	plicable)	
I request the Conse				
B. 1.	Name Po Box 83 Mailing Address West Box City/Town 978 352 Phone Number Representative (if Firm Contact Name Mailing Address City/Town Phone Number B. Determination I request the Conse a. whether the jurisdiction of the purisdiction of	Name Po Box 83 Mailing Address West Box Ford City/Town 978 352616 Phone Number Contact Name Mailing Address City/Town Phone Number B. Determinations 1. I request the Box Ford Conservation Commission a. whether the area depicted on plan(s) ar jurisdiction of the Wetlands Protection Act. b. whether the boundaries of resource are below are accurately delineated. c. whether the work depicted on plan(s) ref d. whether the area and/or work depicted of any municipal wetlands ordinance or Name of Municipality e. whether the following scope of alternate	Name Po Box 83 Mailing Address City/Town 978 35261/6 Phone Number Representative (if any): Firm Contact Name Mailing Address City/Town Phone Number Representative (if any): Firm Contact Name E-Mail Address City/Town State Fax Number (if any) B. Determinations 1. I request the Box Gox make the following determination(s). Conservation Commission a. whether the area depicted on plan(s) and/or map(s) referenced below is a jurisdiction of the Wetlands Protection Act. b. whether the boundaries of resource area(s) depicted on plan(s) and/or map below are accurately delineated. c. whether the work depicted on plan(s) referenced below is subject to the Wetlands of any municipal wetlands ordinance or bylaw of: Name of Municipality e. whether the following scope of alternatives is adequate for work in the Response of the subject of the position of the plan of the	



1.

2.

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C. Project Description

a. Project Location (use maps and plans to identify the location of the area su	bject to this request):
20C STILES POND ROAD Street Address City/Town	
181/35	
Assessors Map/Plat Number Parcel/Lot/Number	
b. Area Description (use additional paper, if necessary): SIDE YARD OF IHOUSE	
SIDE MICE OF HOUSE	
c. Plan and/or Map Reference(s):	1
CAS GENERATOR PLAN Title	6-12-18
	Date
Title	Date
Title	Date
a. Work Description (use additional paper and/or provide plan(s) of work, if ne	cessary):
INSTALL CONCRETE SLAB ON GRADE	FOR
GENERATOR - PRECAST APPROX 5' AND	MAZIBO
GENERATOR - PRECAST APPROX 5' AND X 4'; ALSO PRECAST CONCRETE S	IARC FOD
PAROLIT -1-14 (#2 . 2) NARA	SUTUS IOR
PROPANE TANKS (#2 x 2' DIAM)	



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C. Project Description (cont.)

	VV+5
a. Ri	If this application is a Request for Determination of Scope of Alternatives for work in the verfront 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
<u> </u>	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 d restriction limiting total alteration of the Riverfront Area for the entire subdivision
С.	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. ab	Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classification ove (use additional paper and/or attach appropriate documents, if necessary.)
	NA



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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 and address of the property owner: Louise & David Kiess	
Name P. O. Box 83	
Mailing Address	
City/Town Barbard MA	01883
State	Zip Code
Signatures:	
I also understand that notification of this Request will be placed in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection	
Signature of Applicant	Date /12/2018
Signature of Representative (if any)	Date