



WPA Form 1- Request for Determination of Applicability

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

A. General Information

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



1. Applicant:
- Name Joseph E. Kelley & Lindsey M. Kelley E-Mail Address lindseykelley919@gmail.com
- Mailing Address 9 School St.
- City/Town Boxford State MA Zip Code 01921
- Phone Number 978 729 8420 Fax Number (if applicable) 978 887 2955 (Gibraltar)
2. Representative (if any):
- Firm Gibraltar Pools & Spas
- Contact Name P.J. de Bernardo E-Mail Address peter@usaswim.com
- Mailing Address 435 Boston St.
- City/Town Topfield State MA Zip Code 01983
- Phone Number 978 887 2424 Fax Number (if applicable) 978 887 2955

B. Determinations

1. I request the Boxford Conservation Commission make the following determination(s). Check any that apply:

- a. whether the **area** depicted on plan(s) and/or map(s) referenced below is an area subject to jurisdiction of the Wetlands Protection Act.
- b. whether the **boundaries** of resource area(s) depicted on plan(s) and/or map(s) referenced below are accurately delineated.
- c. whether the **work** depicted on plan(s) referenced below is subject to the Wetlands Protection Act.
- d. whether the area and/or work depicted on plan(s) referenced below is subject to the jurisdiction of any **municipal wetlands ordinance** or **bylaw** of:

Boxford
Name of Municipality

- e. whether the following **scope of alternatives** is adequate for work in the Riverfront Area as depicted on referenced plan(s).
- _____
- _____
- _____



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C. Project Description

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

9 School St.	Boxford
Street Address	City/Town
26	01/03
Assessors Map/Plat Number	Parcel/Lot Number

b. Area Description (use additional paper, if necessary):

This is a typical residential (suburban) setting consisting of a 1.86 acre lot improved by a contemporary wood shingled dwelling and a detached garage. The proposed work will take place in the area furthest from the BVW and will be entirely in an area of maintained lawn between the 25- and 75- foot buffers.

c. Plan and/or Map Reference(s):

ABOVE GROUND POOL PLAN ON CONSERVATION AS-BUILT MAP	6-9-2020
Title	Date
Title	Date
Title	Date

2. a. Work Description (use additional paper and/or provide plan(s) of work, if necessary):

We propose to assemble a 12x24 Edge of Water Above Ground Pool (TOTAL "AIRSPACE" will be 16x32 with cantilevered safety ledge that is part of the engineered pool structure) A small tractor with a sod removal implement will strip off a 16x32 area of grass. No excavation will be effected. Total tractor time on premises will be less than one hour. The above ground pool will then be assembled on a base of washed mason sand that we will rake by hand in the work area. All assembly will be hand work. This will all be done in what is currently maintained lawn. A self-contained green cartridge filtration system will be used, which means there will be no Backwashing of treated pool water, ever. All the water will be confined within the walls of the pool. Total work time will be eight hours from start to finish.



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C. Project Description (cont.)

b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary).

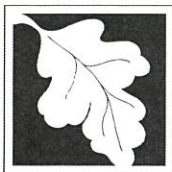
MINOR ACTIVITY REF. 310 CMR 10.02(2)(b)(2) SS(e)

↑
"bee"

3. a. If this application is a Request for Determination of Scope of Alternatives for work in the Riverfront Area, indicate the one classification below that best describes the project.

- Single family house on a lot recorded on or before 8/1/96
- Single family house on a lot recorded after 8/1/96
- Expansion of an existing structure on a lot recorded after 8/1/96
- Project, other than a single family house or public project, where the applicant owned the lot before 8/7/96
- New agriculture or aquaculture project
- Public project where funds were appropriated prior to 8/7/96
- Project on a lot shown on an approved, definitive subdivision plan where there is a recorded deed restriction limiting total alteration of the Riverfront Area for the entire subdivision
- Residential subdivision; institutional, industrial, or commercial project
- Municipal project
- District, county, state, or federal government project
- Project required to evaluate off-site alternatives in more than one municipality in an Environmental Impact Report under MEPA or in an alternatives analysis pursuant to an application for a 404 permit from the U.S. Army Corps of Engineers or 401 Water Quality Certification from the Department of Environmental Protection.

b. Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classification above (use additional paper and/or attach appropriate documents, if necessary.)



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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:

Joseph E. Kelley & Lindsey M. Kelley

Name

9 School St.

Mailing Address

Boxford

City/Town

MA

State

01921

Zip Code

Signatures:

I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

[Signature] Agent

Signature of Applicant

6-9-2020

Date

[Signature]

Signature of Representative (if any)

6-9-2020

Date

GIBALTAR POOLS CORP.
435 BOSTON STREET
TOPSFIELD, MA 01983
PH: 978-887-2424

1439

53-7094/2113
04

NO CHECKS ALLOWED

DATE 6-12-2020

PAY TO THE ORDER OF Town of Boxford, Massachusetts

\$ 100.00

DOLLARS

Security Features
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FOR

 INSTITUTION FOR SAVINGS
BUILDING STRONGER COMMUNITIES TOGETHER SINCE 1870

RDA APP FEE 9 School St. (Kelley)

(By M.B. Kelley)

MP

⑆001439⑆ ⑆211370943⑆ ⑆88 029382 4⑆

GIBALTAR POOLS CORP.
435 BOSTON STREET
TOPSFIELD, MA 01983
PH: 978-887-2424

1440

53-70842113
04

CHECK ARMOR

DATE 6-14-2020

PAY TO THE ORDER OF

Town of boxford, Massachusetts

\$ 25.00

Twenty-five only

DOLLARS

Security Features
Visible on
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INSTITUTION FOR SAVINGS
BUILDING STRONGER COMMUNITIES TOGETHER SINCE 1820.

FOR CERTIFIED LIST OF ABUTTERS, 9 School St.

By Deborah

⑈001440⑈ ⑈221370943⑈ ⑈88 029382 4⑈