

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

372 Ipswich Rd		Boxford	01921
a. Street Address		b. City/Town	c. Zip Code
Latituda and Langit	udo	N42° 41' 24.9318"	W71° 1' 50.7246"
Latitude and Longit	ude.	d. Latitude	e. Longitude
18		2-4	
f. Assessors Map/Plat N	lumber	g. Parcel /Lot Number	
Applicant:			
Richard		Boldi	
a. First Name		b. Last Name	
Camp Rotary, Inc.			
c. Organization			
PO Box 375			
d. Street Address			
Boxford		MA	01921
e. City/Town		f. State	g. Zip Code
h. Phone Number	i. Fax Number	j. Email Address	
n. i none ramber	i. i ax i ambei	j. Email Address	
a. First Name		b. Last Name	
Camp Rotary, Inc.			
Camp Rotary, Inc. c. Organization			
c. Organization			
c. Organization PO Box 270		MA	01921
c. Organization PO Box 270 d. Street Address		MA f. State	01921 g. Zip Code
c. Organization PO Box 270 d. Street Address Boxford	i. Fax Number		_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town		f. State	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number		f. State	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a		f. State j. Email address	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme	any):	f. State j. Email address Hughes	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name	any):	f. State j. Email address Hughes	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company 44 Merrimac Street	ntal Consulting	f. State j. Email address Hughes	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company	ntal Consulting	f. State j. Email address Hughes	_
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company 44 Merrimac Street d. Street Address Newburyport	ntal Consulting	f. State j. Email address Hughes	g. Zip Code
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company 44 Merrimac Street d. Street Address	ntal Consulting	f. State j. Email address Hughes b. Last Name	g. Zip Code
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company 44 Merrimac Street d. Street Address Newburyport	ntal Consulting	f. State j. Email address Hughes b. Last Name MA f. State thughes@hughesenvr.cor	g. Zip Code 01950 g. Zip Code
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company 44 Merrimac Street d. Street Address Newburyport e. City/Town	ntal Consulting	f. State j. Email address Hughes b. Last Name MA f. State	g. Zip Code 01950 g. Zip Code
c. Organization PO Box 270 d. Street Address Boxford e. City/Town h. Phone Number Representative (if a Tom a. First Name Hughes Environme c. Company 44 Merrimac Street d. Street Address Newburyport e. City/Town 978-465-5400 h. Phone Number	ental Consulting	f. State j. Email address Hughes b. Last Name MA f. State thughes@hughesenvr.cor j. Email address	g. Zip Code 01950 g. Zip Code



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A. General Information (continued)

<i>,</i>	a Solioidi illioilliddol (collilliddd)				
6.	, .				
	Foundation repair and renovations, including temporary work access route, on dining hall within buffer zone to the bank of Stiles Pond at Camp Rotary.				
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.	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 No No No No No No No No N				
	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 at Project Checklist and Signed Certification.	tach Appendix A. Ecological Nestoration Limited			
8.	Property recorded at the Registry of Deeds for:				
	Essex South				
	a. County	b. Certificate # (if registered land)			
		d. Page Number			
B.	Buffer Zone & Resource Area Impa	acts (temporary & permanent)			
	-				
1.	⊠ Buffer Zone Only – Check if the project is located Vegetated Wetland, Inland Bank, or Coastal Re				
2.	Inland Resource Areas (see 310 CMR 10.54-10 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)

	Resource Area		Size of Proposed Alteration	Proposed Replacement (if any)	
	a. Bank		1. linear feet	2. linear feet	
	b	Bordering Vegetated Wetland	1. square feet	2. square feet	
	с. 🗌	Land Under Waterbodies and	1. square feet	2. square feet	
		Waterways	3. cubic yards dredged		
	Res	ource Area	Size of Proposed Alteration	Proposed Replacement (if any)	
	d. [Bordering Land Subject to Flooding	1. square feet	2. square feet	
			3. cubic feet of flood storage lost	4. cubic feet replaced	
	е. 🗌	Isolated Land			
		Subject to Flooding	1. square feet		
			2. cubic feet of flood storage lost	3. cubic feet replaced	
	f. Riverfront Area		Name of Waterway (if available) - specential - spece	cify coastal or inland	
	2. Width of Riverfront Area (check one):		(check one):		
25 ft Designated Densely Developed Area		ensely Developed Areas only			
	☐ 100 ft New agricultur☐ 200 ft All other project		ural projects only		
			ects		
3. Total area of Riverfront Area on the site of the proposed project:			et: square feet		
				Square reer	
	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 analysi	s been done and is it attached to th	is NOI? Yes No	
		6. Was the lot where the activ	ity is proposed created prior to Aug	ust 1, 1996? ☐ Yes ☐ No	
3.		Coastal Resource Areas: (See	310 CMR 10.25-10.35)		

For all projects affecting other Resource Areas, please attach a narrative explaining how the resource area was delineated.

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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.

4.

5.

Resou	irce Area	Size of Proposed Alteration	Proposed Replacement (if any)	
а. 🗌	Designated Port Areas	Indicate size under Land Und	ndicate size under Land Under the Ocean, below	
b. 🗌	Land Under the Ocean	1. square feet	_	
		2. cubic yards dredged	_	
с. 🗌	Barrier Beach	Indicate size under Coastal Be	aches and/or Coastal Dunes below	
d. 🗌	Coastal Beaches	1. square feet	2. cubic yards beach nourishment	
е. 🗌	Coastal Dunes	1. square feet	2. cubic yards dune nourishment	
		Size of Proposed Alteration	Proposed Replacement (if any)	
f	Coastal Banks	1. linear feet	_	
g. 🔲	Rocky Intertidal Shores	1. square feet	_	
h. 🗌	Salt Marshes	1. square feet	2. sq ft restoration, rehab., creation	
i. 🗌	Land Under Salt Ponds	1. square feet	_	
		2. cubic yards dredged	_	
j. 🗌	Land Containing Shellfish	1. square feet	-	
k. 🗌	Fish Runs		nks, inland Bank, Land Under the der Waterbodies and Waterways,	
		1. cubic yards dredged	_	
I. 🗌	Land Subject to Coastal Storm Flowage	1. square feet	_	
If the p	estoration/Enhancement project is for the purpose o	f restoring or enhancing a wetland tered in Section B.2.b or B.3.h ab		
a. squar	a. square feet of BVW		f Salt Marsh	
☐ Pr	roject Involves Stream Cro	ssings		
a. numb	per of new stream crossings	b. number of rep	placement stream crossings	



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_	Boxford City/Town	
	•	

Мa	Massachusetts Wetlands Protection Act M.G.L. c. 131, §4		Boxford City/Town		
<u> </u>	Other Applicable Standards and	Requirements	City/Town		
٠.	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).				
Str	reamlined Massachusetts Endangered Spec	cies 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 <i>Massachusetts Natural Heritage Atlas</i> or go to http://maps.massgis.state.ma.us/PRI_EST_HAB/viewer.htm .				
	a. Yes No If yes, include proof of r	mailing or hand deliv	very of NOI to:		
	August 1, 2017 b. Date of map Natural Heritage and E Division of Fisheries a 1 Rabbit Hill Road Westborough, MA 015		rogram		
	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	of site			
2.	Project plans for entire project site, including wetlands jurisdiction, showing existing and propositree/vegetation clearing line, and clearly demarcan	sed conditions, existin ted limits of work **	g and proposed		
	(a) Project description (including descript	ion of impacts outside	of wetland resource area &		

Photographs representative of the site

buffer zone)

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^{*} 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.



3.

Massachusetts Department of Environmental ProtectionBureau of Resource Protection - Wetlands

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

(c) MESA filing fee (fee information available at http://www.mass.gov/dfwele/dfw/nhesp/regulatory_review/mesa/mesa_fee_schedule.htm). Make check payable to "Commonwealth of Massachusetts - NHESP" and <i>mail to NHESP</i> at above address			
Projects altering 10 or more acres of land, also submit:			
(d)	Vegetation cover type map of site		
(e)	(e) Project plans showing Priority & Estimated Habitat boundaries		
(f) OI	R 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/nhesp/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" dete Permit with approved plan.	rmination or valid Conse	rvation & Management
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:			
Southeast Marine Fisheries Station Attn: Environmental Reviewer 836 South Rodney French Blvd. New Bedford, MA 02744		Division of Marine Fisheric North Shore Office Attn: Environmental Revie 30 Emerson Avenue Gloucester, MA 01930 Email: <u>DMF.EnvReviev</u>	ewer

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.

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

	4.	Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?	
Online Users: Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the Department.		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?	
		 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: 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. Subscription 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.)	

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to the boundaries of each affected resource area.

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

2.



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D. Additional Information (cont'd)

	(111)			
3. 🔀		source area boundary delineations (MassDEP BVW licability, Order of Resource Area Delineation, etc.), addology.		
4. 🛛	List the titles and dates for all plans and o	ther materials submitted with this NOI.		
Site	e Plan in Boxford, MA property of Camp Ro	otary, Inc.		
a. P	lan Title			
	Donohoe Survey, Inc. Paul J. Donohoe, PLS			
b. P	repared By	c. Signed and Stamped by		
	y 17, 2018	1" = 10'		
d. F	inal Revision Date	e. Scale		
f. Ac	dditional 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.			
	nts must submit the following information (ansmittal Form) to confirm fee payment:	in addition to pages 1 and 2 of the NOI Wetland		
2. Munici	pal Check Number	3. Check date		
4. State 0	4. State Check Number 5. Check date			

7. Payor name on check: Last Name

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6. Payor name on check: First 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.

1. Signature of Applicant	2. Date		
3. Signature of Property Owner (if different)	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.

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Massachusetts Department of Environmental Protection

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NOI Wetland Fee Transmittal Form

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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: 372 Ipswich Road **Boxford** a. Street Address b. City/Town 237.50 c. Check number d. Fee amount Applicant Mailing Address: **RIchard** Boldi a. First Name b. Last Name Camp Rotary, Inc. c. Organization PO Box 375 d. Mailing Address **Boxford** 01921 MA e. City/Town f. State g. Zip Code h. Phone Number i. Fax Number j. Email Address 3. Property Owner (if different): a. First Name b. Last Name Camp Rotary, Inc. c. Organization PO Box 270 d. Mailing Address MA 01921 Boxford e. City/Town f. State g. Zip Code h. Phone Number i. Fax Number i. 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.



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B. Fees (continued)			
Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
Category 2, Other	1	500.00	500.00
	Step 5/T	otal Project Fee:	500.00
	Step 6	Fee Payments:	
	Total	Project Fee:	500.00 a. Total Fee from Step 5
	State share	of filing Fee:	237.50 b. 1/2 Total Fee less \$ 12.50
	City/Town shar	e of filling Fee:	262.50 c. 1/2 Total Fee plus \$12.50

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.)