

Massachusetts Department of Environmental Protection Bureau of Resource Protection - Wetlands

WPA Form 3 – Notice of Intent

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

City/Town

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

A. General Information

1. Project Location (Note: electronic filers will click on button to locate project site):

32 Lake Dr	Shutesbury	MA
a. Street Address	b. City/Town	c. Zip Code
Latitude and Lengitude:	42.499830	-72.433960
Latitude and Longitude:	d. Latitude	e. Longitude
B-93		
f. Assessors Map/Plat Number	g. Parcel /Lot Numbe	er
Applicant:		
Steven & Meaghen	Mikolajczuk	
a. First Name	b. Last Name	
c. Organization		
4 Canterbury Rd		
d. Street Address		
Windham	NH	03087
e. City/Town	f. State	g. Zip Code
603-508-0007	steven.mikolajczuk@	gmail.com
h. Phone Number i. Fax Nur		
Property owner (required if different a. First Name	ent from applicant): Check if	more than one owner
a. First Name c. Organization		more than one owner
a. First Name		more than one owner
a. First Name c. Organization		more than one owner
a. First Name c. Organization d. Street Address	b. Last Name	
a. First Name c. Organization d. Street Address e. City/Town	b. Last Name	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number	b. Last Name	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any):	b. Last Name f. State nber j. Email address	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any): Jeff a. First Name	b. Last Name f. State nber j. Email address	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any): Jeff	b. Last Name f. State nber j. Email address	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any): Jeff a. First Name Jeff LeBeau, Jr. PE	b. Last Name f. State nber j. Email address	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Num Representative (if any): Jeff a. First Name Jeff LeBeau, Jr. PE c. Company	b. Last Name f. State nber j. Email address	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any): Jeff a. First Name Jeff LeBeau, Jr. PE c. Company 88 Coral Rd d. Street Address	b. Last Name f. State nber j. Email address	g. Zip Code
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any): Jeff a. First Name Jeff LeBeau, Jr. PE c. Company 88 Coral Rd	b. Last Name b. Last Name f. State b. Last Name b. Last N	
a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Nur Representative (if any): Jeff a. First Name Jeff LeBeau, Jr. PE c. Company 88 Coral Rd d. Street Address Springfield	b. Last Name b. Last Name f. State b. Last Name b. Last Name b. Last Name MA	g. Zip Code



Note: Before completing this form consult your local Conservation Commission regarding any municipal bylaw or ordinance.



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A. General Information (continued)

6. General Project Description:

see attached narrative

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

1.	 S	Single Family Home	2.	_	Residential Subdivision
3.	_ C	Commercial/Industrial	4.	_	Dock/Pier
5.	_ L	Jtilities	6.	_	Coastal engineering Structure
7.	_ A	griculture (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)?

	If yes, describe which limited project applies to this project. (See 310 CMR
1. 👝 Yes 👝 No	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:

Franklin	
a. County	 b. Certificate # (if registered land)
07385	233
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)

	Resou	rce Area	Size of Proposed Alteration	Proposed Replacement (if any)			
For all projects	a. 👝	Bank	1. linear feet	2. linear feet			
affecting other Resource Areas, please attach a	b. 👝	Bordering Vegetated Wetland	1. square feet	2. square feet			
narrative explaining how the resource	C. 👝	Land Under Waterbodies and	1. square feet	2. square feet			
area was delineated.		Waterways	3. cubic yards dredged	-			
demicated.	Resou	rce Area	Size of Proposed Alteration	Proposed Replacement (if any)			
	d. 👝	Bordering Land Subject to Flooding	1. square feet	2. square feet			
	0	Isolated Land	3. cubic feet of flood storage lost	4. cubic feet replaced			
	е. 👝	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) - s	pecify coastal or inland			
	2.	Width of Riverfront Area	a (check one):				
	25 ft Designated Densely Developed Areas only						
		👝 100 ft New agricu	Itural projects only				
		_ 200 ft All other pro	ojects				
	3.	Total area of Riverfront A	rea on the site of the proposed proj	ect: square feet			
	4.	Proposed alteration of the	Riverfront Area:	·			
	a. 1	total square feet	b. square feet within 100 ft.	c. square feet between 100 ft. and 200 ft.			
	5.	Has an alternatives analys	sis been done and is it attached to	this NOI? _ Yes _ No			
	6.	Was the lot where the act	ivity is proposed created prior to A	ugust 1, 1996? _ Yes _ No			
;	3. <u> </u>	astal Resource Areas: (Se	ee 310 CMR 10.25-10.35)				
	Note:	for coastal riverfront areas	s, 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		Resour	ce Area	Size of Proposed Alteration Proposed Replacement (if any				
transaction number (provided on your		а. 👝	Designated Port Areas	Indicate size ur	nder Land Under	the Ocean, below		
receipt page) with all		b. 👝	Land Under the Ocean	1. square feet				
supplementary information you submit to the				2. cubic yards dredg	ed			
Department.		C. 👝	Barrier Beach	Indicate size und	der Coastal Bead	ches and/or Coastal Dunes below		
		d. 👝	Coastal Beaches	1. square feet		2. cubic yards beach nourishment		
		e. 👝	Coastal Dunes	1. square feet		2. cubic yards dune nourishment		
				Size of Proposed	d 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 dredg	ed			
		j. 👝	Land Containing Shellfish	1. square feet				
		k. 👝	Fish Runs			ks, inland Bank, Land Under the r Waterbodies and Waterways,		
				1. cubic yards dredg	ed			
		l. <u>—</u>	Land Subject to Coastal Storm Flowage	1. square feet				
4	4.	If the p	footage that has been enter			esource area in addition to the /e, please enter the additional		
		a. square	e feet of BVW		b. square feet of S	alt Marsh		
Ę	5.	_ Pro	ject Involves Stream Cross	sings				
		a. numbe	er of new stream crossings		b. number of repla	cement 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.

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
h. Date of man	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.

- 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 **
 - Project description (including description of impacts outside of wetland resource area & (a) 👝 buffer zone)
 - Photographs representative of the site (b) 👝

wpaform3.doc • rev. 6/28/2016

^{*} 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.



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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 *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
- 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" 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 North Shore - Hull to New Hampshire border: the Cape & Islands:

Division of Marine Fisheries -Southeast Marine Fisheries Station Attn: Environmental Reviewer 1213 Purchase Street – 3rd Floor New Bedford, MA 02740-6694 Email: DMF.EnvReview-South@state.ma.us Division of Marine Fisheries -North Shore Office Attn: Environmental Reviewer 30 Emerson Avenue Gloucester, MA 01930

Email: DMF.EnvReview-North@state.ma.us

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 receipt page) with all supplementary information you submit to the Department.

If yes, provide name of ACEC (see instructions to WPA Form 3 or MassDEP a. 👝 Yes 🔔 No Website for ACEC locations). Note: electronic filers click on Website. b. ACEC (provided on your 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)? 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 а. 👝 Standards per 310 CMR 10.05(6)(k)-(q) and check if: Applying for Low Impact Development (LID) site design credits (as described in 1. 👝 Stormwater Management Handbook Vol. 2, Chapter 3) A portion of the site constitutes redevelopment 2. ____ Proprietary BMPs are included in the Stormwater Management System. 3. 👝

- No. Check why the project is exempt: b. ____
 - Single-family house 1. 🕳
 - Emergency road repair 2. 👝
 - Small Residential Subdivision (less than or equal to 4 single-family houses or less than 3. 👝 equal to 4 units in multi-family housing project) with no discharge to Critical Areas. or

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 1. 👝 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 2. 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 Disposal System Site F	lan	
a. Plan Title		
Jeff Lebeau, PE	Jeff Lebeau, PE	
b. Prepared By	c. Signed and Stamp	oed by
3/16/2020	1"=20'	
d. Final Revision Date	e. Scale	
Subsurface Disposal System Site F	'lan [1"-10' scale]	5/7/2020
f. Additional Plan or Document Title		g. Date
If there is more than one prope	rty owner please attach a list (of these property owners not

- 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:

500	5/20/2020
2. Municipal Check Number	3. Check date
via eDEP	
4. State Check Number	5. Check date
Steven	Mikolajczuk
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.

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.



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

 Location of Project 	ect:		
32 Lake Drive		Shutesbury	
a. Street Address		b. City/Town	
		\$500	
c. Check number		d. Fee amount	
2. Applicant Mailin	g Address:		
Steven & Meagh	nen	Mikolajczuk	
a. First Name		b. Last Name	
c. Organization			
4 Canterbury Ro	ł		
d. Mailing Address			
Windham		NH	03087
e. City/Town		f. State	g. Zip Code
603-508-0007		steven.mikolajczuk@gmail.co	m
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	

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 Single Family House	1	\$500	\$500
	Sten 5/To	tal Project Fee:	\$500
	-	Fee Payments:	4000
	Total F	Project Fee:	\$500 a. Total Fee from Step 5
	State share	of filing Fee:	\$237.50 b. 1/2 Total Fee less \$ 12.50
	City/Town share	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.)