

Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Wetlands

Foxborough

WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 Foxborough Wetlands Protection Bylaw, Chapter 267

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.





2.

3.

Applicant:				
Carol & Martin Beane		cabeane@verizon.net		
Name		ess		
199 South Street				
Mailing Address	242	20025		
City/Town	MA State	02035 Zip Code		
781-424-4598		mip bout		
Phone Number	Fax Number (if applicable)			
Representative (If any):				
Firm				
Contact Name	E-Mail Addı	ess		
Mailing Address				
City/Town	State	Zip Code		
Phone Number	Fax Numbe	r (if applicable)		
Foxborough wetlands bylaw filing fee enclosed:				
☐ Single Family House: \$75 ☐ Restoration Project: \$2	.5 🗆	Other Projects: \$200		
Determinations				
I request that the Foxborough Conservation Commission make t any that apply:	he followin	g determination(s). <i>Check</i>		
a. whether the area depicted on plan(s) and/or map(s) refer jurisdiction of the Wetlands Protection Act.	enced belo	w is an area subject to		
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 Act.	c. whether the work depicted on plan(s) referenced below is subject to the Wetlands Protection			
 d. whether the area and/or work depicted on plan(s) referenced below is subject to the jurisdiction of the Foxborough Wetlands Protection Bylaw. 				
e. (for Riverfront Areas, only) whether the following scope of alternatives is adequate for work in the Riverfront Area as depicted on referenced plan(s).				
Project Description				
a. Project Location (use maps and plans to identify the location	on of the ar	ea subject to this request):		
100 South Stroot Forharough 122// 050	1000 00010	00 4967		

1.	a.	Project Location	(use maps and	i plans i	to identify the loc	ation of the area subject to this re	quest).
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199 South Street	Foxborough	132/ / 050/000 000/000	4867
Street Address	Town	Assessors Map/Plat Number	Parcel/Lot Number



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C. Project Description

C.	Fr	oje	ct Description				
	b.		a Description (i.e. back yard, wooded area, industrial, etc.): k yard, wooded area, wetlands?				
	c.	Plai	Plan and/or Map Reference(s):				
		Title	Date				
		Title		Date			
2.	a.	Wo	Work Description (use additional paper and/or provide plan(s) of work, if necessary):				
		Clea	ar up overgrown brush				
	b.	lder	tify provisions of the Wetlands Protection Act or regulations which may	exempt the applicant			
		fron	having to file a Notice of Intent for all or part of the described work.				
3.	_		roposed project is within 200 feet of a river:				
	 a. If this application is a Request for Determination of <u>Scope of Alternatives</u> 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 a before 8/7/96	pplicant owned the lot			
			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 whe deed restriction limiting total alteration of the Riverfront Area for the en	re there is a recorded tire 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 muniformental Impact Report under MEPA or in an alternatives analysis application for a 404 permit from the U.S. Army Corps of Engineers or Certification from the Department of Environmental Protection.	is pursuant to an			
	b.	Prov	ride evidence (e.g., record of date subdivision lot was recorded) suppor	ting the classification			

above (use additional paper and/or attach appropriate documents, if necessary.)

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D. Signatures and Submittal Requirements

Name and address of the property owner: Carol Beane Name 199 South Street 02035 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 (see below) 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. I also understand that notification of this Request will be placed in a local newspaper (by the Conservation Office) at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations. Signatures: Med A Cane 12/9/20 Date Signature of Representative (if any) Date Tax Collector's Release: The above referenced applicant is applying for a permit from the Conservation Commission and is in good standing with respect to any taxes, fees, assessments, betterments or other municipal charges as recorded with the Foxborough Treasurer's Office. Signature of Tax Collector or Agent

Submittal Requirements:

For Conservation Commission:

One original and seven copies of this completed Request (including all appropriate documentation) and town fee payment, by mail or hand delivery to:

> **Foxborough Conservation Commission 40 South Street** Foxborough, MA 01035

For MassDEP:

One copy of the completed Request (including all appropriate documentation) by certified mail or hand delivery to:

> MassDEP, Southeast Regional Office 20 Riverside Drive Lakeville, MA 02347

