

Bureau of Resource Protection - Wetlands

**A. General Information** 

# 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 91-274 Arlington 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.

12 Clyde Terrace		Arlington	02474
a. Street Address		b. City/Town	c. Zip Code
Latitude and Longitu	ıde:	d. Latitude	e. Longitude
108-02-0015			
f. Assessors Map/Plat Nu	mber	g. Parcel /Lot Number	r
Applicant:			
Scott		Seaver	
a. First Name		b. Last Name	
Seaver Construction			
c. Organization			
215 Lexington Stree	t		
d. Street Address			
Woburn		MA	01801
e. City/Town		f. State	g. Zip Code
617 935 0130	· · · · · · · · · · · · · · · · · · ·	sseaver@seavercons	struction.com
h. Phone Number	i. Fax Number	j. Email Address	
Margaret a. First Name 12 Clyde Terrace Tr	ust	Papagni, Trust b. Last Name	lee
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington	ust	b. Last Name	02474
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address	ust	b. Last Name	
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington	ust . Fax Number	b. Last Name	02474
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town	i. Fax Number	b. Last Name MA f. State	02474
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar	i. Fax Number	b. Last Name MA f. State j. Email address	02474
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a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar Mary a. First Name c. Company	i. Fax Number	b. Last Name MA f. State j. Email address Trudeau	02474
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar Mary a. First Name c. Company 141 Lowell Street	i. Fax Number	b. Last Name MA f. State j. Email address Trudeau	02474
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar Mary a. First Name c. Company 141 Lowell Street d. Street Address	i. Fax Number	b. Last Name MA f. State j. Email address Trudeau b. Last Name	<u>02474</u> g. Zip Code
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar Mary a. First Name c. Company 141 Lowell Street d. Street Address Lexington	i. Fax Number	b. Last Name MA f. State j. Email address Trudeau b. Last Name MA	<u>02474</u> g. Zip Code
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar Mary a. First Name c. Company 141 Lowell Street d. Street Address Lexington e. City/Town	i. Fax Number	b. Last Name  MA f. State j. Email address Trudeau b. Last Name MA f. State	<u>02474</u> g. Zip Code  
a. First Name 12 Clyde Terrace Tr c. Organization 12 Clyde Terrace d. Street Address Arlington e. City/Town h. Phone Number Representative (if ar Mary a. First Name c. Company 141 Lowell Street d. Street Address Lexington	i. Fax Number	b. Last Name MA f. State j. Email address Trudeau b. Last Name MA	<u>02474</u> g. Zip Code  

ree Faid for 91-274 lilling		Φ
a. Total Fee Paid	b. State Fee Paid	c. City/Town Fee Paid



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### A. General Information (continued)

6. General Project Description:

Demolition of an existing single family dwelling and reconstruction of a new single family dwelling unit. Work is within one hundred feet of a vegetated wetland. Work is regulated under an SOC issued on February 21, 2017 approving the project..

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. 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)?

Vaa	es 🖂 No	If yes, describe which limited project applies to this project. (See 310 CMR
165		10.24 and 10.53 for a complete list and description of limited project types)

2. Limited Project Type

1. 🗌

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:

Middlesex a. County	b. Certificate # (if registered land)
56793	294
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.



### **Massachusetts Department of Environmental Protection**

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## B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

	<u>Resour</u>	<u>ce Area</u>	Size of Proposed Alteration	Proposed Replacement (if any)
For all projects	a. 🗌 b. 🗍	Bank Bordering Vegetated	1. linear feet	2. linear feet
affecting other Resource Areas, please attach a	Ы. Ш	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	
	Resour	<u>ce Area</u>	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
	e. 🗌	Isolated Land 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) - spec	ify coastal or inland
	2.	Width of Riverfront Area (	check one):	
		25 ft Designated De	ensely Developed Areas only	
		100 ft New agricultu	ral projects only	
		🗌 200 ft All other proje	ects	
	3.	Total area of Riverfront Area	a on the site of the proposed project	t: square feet
	4.	Proposed alteration of the F	Riverfront Area:	Square reet
	a.t	otal square feet	b. square feet within 100 ft.	c. square feet between 100 ft. and 200 ft.
	5.	Has an alternatives analysis	s been done and is it attached to this	s NOI?
	6. \	Was the lot where the activi	ity is proposed created prior to Augu	ıst 1, 1996? 🗌 Yes 🗌 No
3.	🗌 Coa	astal Resource Areas: (See	310 CMR 10.25-10.35)	
	Note:	for coastal riverfront areas,	please complete Section B.2.f. abo	ove.



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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		<u>Resou</u>	rce Area	Size of Proposed	Alteration	Proposed Replacement (if any)
transaction number		а. 🗌	Designated Port Areas	Indicate size ur	nder Land Under	the Ocean, below
(provided on your receipt page) with all		b. 🗌	Land Under the Ocean	1. square feet		
supplementary information you submit to the				2. cubic yards dredge	ed	
Department.		c. 🗌	Barrier Beach	Indicate size und	ler 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 dredge	ed	
		j. 🗌	Land Containing Shellfish	1. square feet		
		k. 🗌	Fish Runs			ks, inland Bank, Land Under the r Waterbodies and Waterways,
				1. cubic yards dredge	ed	
		ı. 🗌	Land Subject to Coastal Storm Flowage	1. square feet		
	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	<u> </u>	b. square feet of S	alt Marsh
	5.	🗌 Pro	pject 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 Notice of Intent – Required Actions (310 CMR 10.11).

#### Streamlined Massachusetts Endangered Species Act/Wetlands Protection Act Review

 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
2008	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. C 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 \*\*
  - (a) Project description (including description of impacts outside of wetland resource area & buffer zone)
  - (b) D Photographs representative of the site

<sup>\*</sup> Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review (see <a href="http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/">http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/</a>). Priority Habitat includes habitat for state-listed plants and strictly upland species not protected by the Wetlands Protection Act.

<sup>\*\*</sup> 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 <u>http://www.mass.gov/dfwele/dfw/nhesp/regulatory\_review/mesa/mesa\_fee\_schedule.htm</u>). 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
- 1. Project is exempt from MESA review. Attach applicant letter indicating which MESA exemption applies. (See 321 CMR 10.14, <u>http://www.mass.gov/dfwele/dfw/nhesp/regulatory\_review/mesa/mesa\_exemptions.htm;</u> 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.		
2.	Separate MESA review origonity.	a. NHESP Tracking #	<ul> <li>b. Date submitted to NHESP</li> </ul>

- 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?

а. 🗌	Not applicable	<ul> <li>project is in in</li> </ul>	land resource area only	b. 🗌	Yes		ю
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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:
Division of Marine Fisheries -	Division of Marine Fisheries -
Southeast Marine Fisheries Station	North Shore Office

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.

		<b>/PA Form 3 – Notice of Intent</b> assachusetts Wetlands Protection Act M.G.L. c. 131, §40	Provided by MassDEP: MassDEP File Number Document Transaction Number 91-274 Arlington City/Town			
	C.	Other Applicable Standards and Requirements	(cont'd)			
	4.	Is any portion of the proposed project within an Area of Critical Environ	mental Concern (ACEC)?			
Online Users: Include your document		a. Yes No If yes, provide name of ACEC (see instructions Website for ACEC locations). <b>Note:</b> electronic				
transaction number		b. ACEC				
(provided on your receipt page) with all	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?				
supplementary information you		a. 🗌 Yes 🖾 No				
	6.	Is any portion of the site subject to a Wetlands Restriction Order under Restriction Act (M.G.L. c. 131, $\S$ 40A) or the Coastal Wetlands Restrict				
		a. 🗌 Yes 🖾 No				
	7.	Is this project subject to provisions of the MassDEP Stormwater Manag	gement Standards?			
		<ul> <li>a. Yes. Attach a copy of the Stormwater Report as required by the Standards per 310 CMR 10.05(6)(k)-(q) and check if:</li> <li>1. Applying for Low Impact Development (LID) site design cress Stormwater Management Handbook Vol. 2, Chapter 3)</li> </ul>	edits (as described in			
		2. A portion of the site constitutes redevelopment				
		3. Proprietary BMPs are included in the Stormwater Manager	nent 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 or equal to 4 units in multi-family housing project) with no disc	5			
	D.	Additional Information				

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. USGS or other map 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.)
- 2. 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 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.

Proposed Plan in Arlington, M	۹			
a. Plan Title				
Keenan Survey	James Richard Keenan			
b. Prepared By	c. Signed and Stamped by			
	1" = 20'			
d. Final Revision Date	e. Scale			
See Notice of Intent application	n			
f. Additional Plan or Document Title	g. Date			
If there is more than one p listed on this form.	roperty owner, please attach a list of these property owners not			
Attach proof of mailing for	Natural Heritage and Endangered Species Program, if needed.			
Attach proof of mailing for	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

5.

6.

7.

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:

2. Municipal Check Number	3. Check date
4. State Check Number	5. Check date
6. Payor name on check: First Name	7. Payor name on check: Last Name



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P:

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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

1.	Location of Project:				
	12 Clyde Terrace         a. Street Address         c. Check number		d. Fee amount		
2.	Applicant Mailing Add	dress:			
	Scott		Seaver		
	a. First Name		b. Last Name		
	Seaver Construction				
	c. Organization				
	215 Lexington Street				
	d. Mailing Address				
	Woburn		MA	01801	
	e. City/Town		f. State	g. Zip Code	
	617 935 0130		sseaver@seaverconstruct	tion.com	
	h. Phone Number	i. Fax Number	j. Email Address		
3.	Property Owner (if di	ferent):			
	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.



### Massachusetts Department of Environmental Protection Bureau of Resource Protection - Wetlands NOI Wetland Fee Transmittal Form

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B. Fees (continued)			
Step 1/Type of Activity		Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
FILING IS MADE UNDER LOCAL			
BYLAW ONLY			
	Step 5/Tot	al Project Fee	\$500.00
	Step 6/Fe	ee Payments:	
	Total P	roject Fee:	a. Total Fee from Step 5
	State share o	of filing Fee:	b. 1/2 Total Fee <b>less \$</b> 12.50
	City/Town share	of filling Fee:	\$262.50 c. 1/2 Total Fee <b>plus</b> \$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.)