



Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Wetlands

WPA Form 1- Request for Determination of Applicability

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

City/Town _____

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: | Robert Bowes | | | bbowes@bowes.com | |
| | Name | | | | E-Mail Address |
| | 26 Lakeview | | | | |
| | Mailing Address | | | | |
| | Arlington | MA | | | 02476 |
| | City/Town | State | | | Zip Code |
| | 781-696-5945 | | | | |
| | Phone Number | Fax Number (if applicable) | | | |
| 2. Representative (if any): | Martha Penzenik Architects | | | | |
| | Firm | | | | martha@penzenik.com |
| | Contact Name | | | | E-Mail Address |
| | 635 Mass. Ave. Ste. 14 | | | | |
| | Mailing Address | | | | |
| | Arlington | MA | | | 02476 |
| | City/Town | State | | | Zip Code |
| | 781-643-1313 | 781-643-4360 | | | |
| | Phone Number | Fax Number (if applicable) | | | |

B. Determinations

1. I request the Conservation Commis make the following determination(s). Check any that apply:
Conservation Commission
- ☐ 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:
- Arlington
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):

26

Arlington

Street Address

121

City/Town

121-1-8

Assessors Map/Plat Number

Parcel/Lot Number

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

Resource area is Spy Pond. The property is an Adjacent Upland Resource Area.

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

Title

Date

Title

Date

Title

Date

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

Please see attached.



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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).

Please see attached.

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:

Robert Bowes

Name

26 24 Lakeview

Mailing Address
Arlington

City/Town
MA


State

02476

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 of Applicant

Date

9/16/2020

Signature of Representative (if any)

Date