

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

Medway

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

	Fairway Lane; Holliston Street; Ohlson Circle;	Medway	02053
	Winthrop Street; Woodland Road	b. City/Town	c. Zip Code
-		42.171606	-71.413740
	Latitude and Longitude:	d. Latitude	e. Longitude
	8; 9; 14; 15	16,19, 20; 51 & 5	8; 5, 20, 21; 1 & 19
	f. Assessors Map/Plat Number	g. Parcel /Lot Number	r
. 8	Applicant:		
	Mounir	Tayara	
-	a. First Name	b. Last Name	
	Timber Crest Estates, LLC		
	c. Organization		
	135 Main Street, Suite 5		
-	d. Street Address		
	Medway	MA	02053
	e. City/Town	f. State	g. Zip Code
	(0.17) 000 F0.10	mtayara@grandishor	meslic com
	(617) 682-5649	III lavaral wurai luisi lui	
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name	j. Email Address	more than one owner
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST)	j. Email Address cant):	
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name	j. Email Address cant):	
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization	j. Email Address cant):	
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address	j. Email Address cant):	more than one owner
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town	j. Email Address cant):	more than one owner
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Number	j. Email Address cant):	more than one owner
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Number Representative (if any):	j. Email Address cant):	more than one owner
	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number i. Fax Number Representative (if any): Scott a. First Name	j. Email Address cant):	more than one owner
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	h. Phone Number i. Fax Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number Representative (if any): Scott a. First Name Goddard Consulting, LLC	j. Email Address cant):	more than one owner
	h. Phone Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number Representative (if any): Scott a. First Name Goddard Consulting, LLC c. Company	j. Email Address cant):	more than one owner
	h. Phone Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number Representative (if any): Scott a. First Name Goddard Consulting, LLC c. Company 291 Main Street, Suite 8 d. Street Address	j. Email Address cant):	more than one owner
	h. Phone Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number Representative (if any): Scott a. First Name Goddard Consulting, LLC c. Company 291 Main Street, Suite 8	j. Email Address cant):	g. Zip Code
	h. Phone Number Property owner (required if different from applied MULTIPLE (SEE ATTACHED LIST) a. First Name c. Organization d. Street Address e. City/Town h. Phone Number Representative (if any): Scott a. First Name Goddard Consulting, LLC c. Company 291 Main Street, Suite 8 d. Street Address Northborough	j. Email Address cant):	g. Zip Code O1532 g. Zip Code

b. State Fee Paid

a. Total Fee Paid

c. City/Town Fee Paid



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A. General Information (continued)

	,						
6.	General Project Description:						
	Site preparation, two roadway crossings and point	source discharges for a residential subdivision.					
		3					
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.		treated as a limited project (including Ecological 0.24 (coastal) or 310 CMR 10.53 (inland)? ed project applies to this project. (See 310 CMR plete list and description of limited project types)					
	2. Limited Project Type						
	If the proposed activity is eligible to be treated as a CMR10.24(8), 310 CMR 10.53(4)), complete and a Project Checklist and Signed Certification.	n Ecological Restoration Limited Project (310 attach Appendix A: Ecological Restoration Limited					
8.	Property recorded at the Registry of Deeds for:						
8.000	SEE ATTACHED LIST						
	a. County	b. Certificate # (if registered land)					
	c. Book	d. Page Number					
В.	Buffer Zone & Resource Area Imp	acts (temporary & permanent)					
1.	☐ Buffer Zone Only – Check if the project is local	ted only in the Buffer Zone of a Bordering					
	Vegetated Wetland, Inland Bank, or Coastal R	esource Area.					
2.							
	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)

Size of Proposed Alteration Proposed Replacement (if any) Resource Area a. 🔀 Bank 2. linear feet 1. linear feet 3,408 3,682 b. **Bordering Vegetated** 2. square feet 1. square feet Wetland 677 c. 🛛 Land Under 1. square feet 2. square feet Waterbodies and Waterways 3. cubic yards dredged Proposed Replacement (if any) Size of Proposed Alteration Resource Area d. 🗌 **Bordering Land** 2. square feet 1. square feet Subject to Flooding 3. cubic feet of flood storage lost 4. cubic feet replaced Isolated Land e. 🔲 1. square feet Subject to Flooding 3. cubic feet replaced 2. cubic feet of flood storage lost f. 🗌 Riverfront Area 1. Name of Waterway (if available) - specify coastal or inland Width of Riverfront Area (check one): 25 ft. - Designated Densely Developed Areas only ☐ 100 ft. - New agricultural projects only 200 ft. - All other projects 3. Total area of Riverfront Area on the site of the proposed project: square feet 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 analysis been done and is it attached to this NOI? ☐ Yes☐ No 6. Was the lot where the activity is proposed created prior to August 1, 1996? Yes No 3. Coastal Resource Areas: (See 310 CMR 10.25-10.35) Note: for coastal riverfront areas, please complete Section B.2.f. above.

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



Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Wetlands

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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.

Resou	rce Area	Size of Proposed Altera	Proposed Replacement (if any)			
а. 🗌	Designated Port Areas	Indicate size under La	and Under the Ocean, below			
b. 🗌	Land Under the Ocean	1. square feet				
		2. cubic yards dredged				
c. 🔲	Barrier Beach	Indicate size under Coa	astal Beaches 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 Altera	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		astal Banks, inland Bank, Land Under the and Under Waterbodies and Waterways,			
		1. cubic yards dredged				
l. 🗌	Land Subject to Coastal Storm Flowage	1. square feet				
Restoration/Enhancement If the project is for the purpose of restoring or enhancing a wetland resource area in addition to the square footage that has been entered in Section B.2.b or B.3.h above, please enter the additional amount here.						
a. squar	e feet of BVW	b. squa	ire feet of Salt Marsh			
⊠ Pr	oject Involves Stream Cros	sings				
2 a. numb	er of new stream crossings	ber of replacement stream crossings				
	2					

4.

5.



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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.	the most re- Natural Her Massachus	Is any portion of the proposed project located in Estimated Habitat of Rare Wildlife as indicated or 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	\boxtimes	No	If yes, include proof of mailing or hand delivery of NOI to:			
	8/1/2017 b. Date of map	0		Natural Heritage and Endangered Species Program Division of Fisheries and Wildlife 1 Rabbit Hill Road Westborough, MA 01581			

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

c	complete Section C.1.c, and include requested materials with this Notice of Intent (NOI), OX 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	c. Submit Supplemental Information for Endangered Species Review*						
	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							
	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 are buffer zone)							
	(b) Photographs representative of the site						

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. Page 5 of 9 wpaform3.doc • rev. 6/28/2016



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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.http://www.mass.gov/dfwele/dfw/nhesp/regulatory and mail to NHI					
	Projects	s altering 10 or more acres of land, also subi	mit:		
	(d)	Vegetation cover type map of site			
	(e)	Project plans showing Priority & Estima	ted Habitat boundaries		
	(f) OF	R Check One of the Following			
	1. 🗌	MESA exemption applies /regulatory_review/mesa/ he project is within estima	mesa exemptions.htm;		
	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 Conser	vation & Management	
3.	For coasta	I projects only, is any portion of the propo fish run?	osed project located below	w the mean high water	
	a. Not a	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: Division of Marine Fisheries - Southeast 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 North Shore - Hull to New Hampshire border: 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 (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. 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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City/T	own	

D. Additional Information (cont'd)

	3. 🛛	Identify the method for BVW and other resormed Data Form(s), Determination of Applicand attach documentation of the method	ource area boundary delineations (MassDEP BVW cability, Order of Resource Area Delineation, etc.), dology.				
	4. 🛛	List the titles and dates for all plans and oth	t the titles and dates for all plans and other materials submitted with this NOI.				
Comprehensive Permit Plans "Timber Crest Estates"							
		lan Title					
		tback Engineering Inc.	James Pavlik				
		repared By	c. Signed and Stamped by				
		5/18	variable				
	d. F	inal Revision Date	e. Scale				
	f. Ad	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.						
	 Attach proof of mailing for Natural Heritage and Endangered Species Program, if needed. Attach proof of mailing for Massachusetts Division of Marine Fisheries, if needed. Attach NOI Wetland Fee Transmittal Form 						
	9. 🛛	Attach Stormwater Report, if needed.					
F	Fees						
_	1 003						
	 Fee Exempt: No filing fee shall be assessed for projects of any city, town, county, or distri- of the Commonwealth, federally recognized Indian tribe housing authority, municipal hous 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:						
	646		9/5/17				
		ipal Check Number	3. Check date				
645			9/5/17				
		Check Number	5. Check date				
		Timber Crest LLC					
	& Davor	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.

Masera	3-30-618
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.