

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return

key.

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

hollist on City/Town

A. General Information

	Applicant:				
	Michael Alves	herco156	herco1569@gmail.com		
	Name	E-Mail Address			
	1569 washington st				
	Mailing Address				
	holliston	ma	01746		
	City/Town	State	Zip Code		
	508-429-7678				
	Phone Number	Fax Number (if app	licable)		
2.	Representative (if any):				
	Firm				
	Contact Name	E-Mail Address			
	Mailing Address				
	City/Town	State	Zip Code		
	Phone Number	Fax Number (if app	licable)		
B.	Determinations				
	I request Holliston make the following the Conservation Commission apply:	ng determination(s). C	heck any that		
	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.				
x	c. whether the work depicted on plan(s) referenced below is Act.	s subject to the Wetla	nds Protection		
x d. whether the area and/or work depicted on plan(s) referenced below is subject to the of any municipal wetlands ordinance or bylaw of:					
	Holliston Name of Municipality				
		for work in the Riverfi	ront Area as		

depicted on referenced plan(s).



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Construct a berm with privacy trees	
Project Description	
. Project Description	
	to identify the location of the area subject to thi
quest): 1569 washington st	holliston
Street Address	City/Town
5-3-62	
Assessors Map/Plat Number	Parcel/Lot Number
b. Area Description (use additional paper, if neces	esary):
Front of Property near septic system and back	• •
c. Plan and/or Map Reference(s):	
Site As Built Plan Scooby Truck Sales	11/22
Title	Date
Title	Date
	Date
Title	Date
a. Work Description (use additional paper and/or p	provide plan(s) of work, if necessary):
Construct a 3ft high, 320ft long berm and pla	net 50 6ft White Pine Privacy Trees
M. M.	



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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).



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a. Riv	If this application is a Request for Determination of Scope of Alternatives for work in the verfront 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.		
	Provide evidence (e.g., record of date subdivision lot was recorded) supporting the sification above (use additional paper and/or attach appropriate documents, if necessary.)		

D. Signatures and Submittal Requirements



Name and address of the property owner:

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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.

Michael Alves					
Name					
1569 washington st					
Mailing Address					
holliston					
City/Town					
ma	01746				
State	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.					
	3-21-24				
Signature of Applicant	Date				
Signature of Representative (if any)	Date				