

10.99: Forms

Form 1

Commonwealth
of Massachusetts

DEP File No

(To be provided by DEP)

City/Town: SeekonkApplicant: Ramos

**Request for a Determination of Applicability
Massachusetts Wetlands Protection Act, G.L. c. 131, §40**

- I, the undersigned, hereby request that the Seekonk
Conservation Commission make a determination as to whether the area, described below, or work to be performed on said area, also described below, is subject to the jurisdiction of the Wetlands Protection Act, G.L. c. 131, §40.
- The area is described as follows. (Use maps or plans, if necessary, to provide a description and the location of the area subject to this request.)

Location: Street Address Provazza DriveLot Number: Plat 12 Lot 242

- The work in said area is described below. (Use additional paper, if necessary, to describe the proposed work.)

The project involves constructing a dwelling within 78' of an existing ditch, an associated driveway within 46' and placing clean fill within 32' of said ditch. Staked hay-bales will be placed along the top edge of the ditch and maintained until all work is completed and loam and seed has been established. There will be no adverse affect on the ditch.

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4. The owner(s) of the area, if not the person making this request, has been given written notification of this request on August 1, 1995 (date)
The name(s) and address(es) of the owner(s):

5. I have filed a complete copy of this request with the appropriate regional office of the Massachusetts Department of Environmental Protection Southeast Regional Office (date) 8/2/95

DEP Northeast Regional Office
5 Commonwealth Avenue
Woburn, MA 01801

DEP Southeast Regional Office
Lakeville Hospital
Route 105
Lakeville, MA 02347

DEP Central Regional Office
75 Grove Street
Worcester, MA 01605

DEP Western Regional Office
State House West, 4th Floor
436 Dwight Street
Springfield, MA 01103

6. I 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 regulations by the Conservation Commission and that I will be billed accordingly.

Signature Semiao C. Ramos Name Semiao Ramos

Address 37 Roma Street, East Prov., RI 02914 Tel. (401) 438-2656