



WPA Form 1- Request for Determination of Applicability

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

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:

Dwight Eddy	---	
Name	E-Mail Address	
125 Hammond Street		
Mailing Address		
Seekonk	MA	02771
City/Town	State	Zip Code
401-598-9288	---	
Phone Number	Fax Number (if applicable)	

2. Representative (if any):

OSD systems associates, Inc.		
Firm		
Dean Monsees	osdea@aol.com	
Contact Name	E-Mail Address	
45 Astral Avenue		
Mailing Address		
Riverside	RI	02915
City/Town	State	Zip Code
401-438-6216	401-438-7354	
Phone Number	Fax Number (if applicable)	

B. Determinations

1. I request the Seekonk Conservation Commission make the following determination(s). Check any that apply:

- 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:

Seekonk
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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Con. Comm.



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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):

125 Hammond Street	Seekonk
Street Address	City/Town
10	264
Assessors Map/Plat Number	Parcel/Lot Number

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

An existing single family dwelling with a bordering vegetative wetland situated to the west of this existing established lot.

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

SEWAGE DISPOSAL SYSTEM REPAIR PLAN	1/5/04
Title	Date
PROVIDENCE QUADRANGLE MAP	1987
Title	Date
Title	Date

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

To repair the existing failed cesspool and dry well with a conventional on site sewage disposal system.



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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).

310 CMR 10.58(6) Notwithstanding the provisions of 310 CMR 10.58(1) through (5), certain activities or areas are grandfathered or exempt from requirements for the riverfront area (per memo 99.1 this applies to resource areas also): (b) Certain minor activities, provided the activity is not within any resource area: 5. The conversion of lawn to uses accessory to existing single family houses. . .

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 (see Appendix A) 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:

Dwight Eddy

Name

125 Hammond Street

Mailing Address

Seekonk

City/Town

MA

02771

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.

X

Signature of Applicant

Date

1/15/04

Deon Merson

Signature of Representative (if any)

Date

1/12/04