



WPA Form 3 – Notice of Intent

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

MassDEP File Number

Document Transaction Number

Acton

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

1. Project Location (Note: electronic filers will click on button to locate project site):

<u>67 Hammond Street</u>	<u>Acton</u>	<u>01720</u>
a. Street Address	b. City/Town	c. Zip Code
Latitude and Longitude:	<u>042 29 41 N</u>	<u>071 26 43 W</u>
	d. Latitude	e. Longitude
<u>Map E-3</u>	<u>Parcel 3</u>	
f. Assessors Map/Plat Number	g. Parcel /Lot Number	

2. Applicant:

<u>Deborah</u>	<u>Turner</u>	
a. First Name	b. Last Name	
c. Organization		
<u>67 Hammond Street</u>		
d. Street Address		
<u>Acton</u>	<u>MA</u>	<u>01720</u>
e. City/Town	f. State	g. Zip Code
<u>978-263-9296</u>		
h. Phone Number	i. Fax Number	j. Email Address

3. Property owner (required if different from applicant): Check if more than one owner

<u></u>	<u></u>	
a. First Name	b. Last Name	
c. Organization		
<u></u>		
d. Street Address		
<u></u>	<u></u>	<u></u>
e. City/Town	f. State	g. Zip Code
<u></u>	<u></u>	<u></u>
h. Phone Number	i. Fax Number	j. Email address

4. Representative (if any):

<u>Kevin</u>	<u>Ritchie</u>	
a. First Name	b. Last Name	
<u>Civil Solutions, Inc.</u>		
c. Company		
<u>P.O. Box 107, 285 Littleton Road, Suite 2</u>		
d. Street Address		
<u>Westford</u>	<u>MA</u>	<u>01886</u>
e. City/Town	f. State	g. Zip Code
<u>(978) 692-5000</u>	<u>(978) 692-0386</u>	<u>civilsolutions@verizon.net</u>
h. Phone Number	i. Fax Number	j. Email address

5. Total WPA Fee Paid (from NOI Wetland Fee Transmittal Form):

<u>\$110.00</u>	<u>\$42.50</u>	<u>\$67.50</u>
a. Total Fee Paid	b. State Fee Paid	c. City/Town Fee Paid



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A. General Information (continued)

6. General Project Description:

Replacement of existing failed sewage disposal system.

7a. Project Type Checklist:

- | | |
|---|---|
| 1. <input type="checkbox"/> Single Family Home | 2. <input type="checkbox"/> Residential Subdivision |
| 3. <input type="checkbox"/> Limited Project Driveway Crossing | 4. <input type="checkbox"/> Commercial/Industrial |
| 5. <input type="checkbox"/> Dock/Pier | 6. <input type="checkbox"/> Utilities |
| 7. <input type="checkbox"/> Coastal Engineering Structure | 8. <input type="checkbox"/> Agriculture (e.g., cranberries, forestry) |
| 9. <input type="checkbox"/> Transportation | 10. <input checked="" type="checkbox"/> Other |

7b. Is any portion of the proposed activity eligible to be treated as a limited project subject to 310 CMR 10.24 (coastal) or 310 CMR 10.53 (inland)?

1. Yes No If yes, describe which limited project applies to this project:

2. Limited Project

8. Property recorded at the Registry of Deeds for:

Middlesex South District

a. County

27809

c. Book

b. Certificate # (if registered land)

289

d. Page Number

B. Buffer Zone & Resource Area Impacts (temporary & permanent)

- Buffer Zone Only – Check if the project is located only in the Buffer Zone of a Bordering Vegetated Wetland, Inland Bank, or Coastal Resource Area.
- Inland Resource Areas (see 310 CMR 10.54-10.58; if not applicable, go to Section B.3, Coastal Resource Areas).

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.

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

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Bank	1. linear feet	2. linear feet
b. <input type="checkbox"/> Bordering Vegetated Wetland	1. square feet	2. square feet
c. <input type="checkbox"/> Land Under Waterbodies and Waterways	1. linear feet 3. cubic yards dredged	2. linear feet



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B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet _____ 3. cubic feet of flood storage lost _____	2. square feet _____ 4. cubic feet replaced _____
e. <input type="checkbox"/> Isolated Land Subject to Flooding	1. square feet _____ 2. cubic feet of flood storage lost _____	3. cubic feet replaced _____
f. <input type="checkbox"/> Riverfront Area	1. Name of Waterway (if available) _____	
2. Width of Riverfront Area (check one):		
<input type="checkbox"/> 25 ft. - Designated Densely Developed Areas only		
<input type="checkbox"/> 100 ft. - New agricultural projects only		
<input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Was the lot where the activity is proposed created prior to August 1, 1996?		<input type="checkbox"/> Yes <input type="checkbox"/> No

3. Coastal Resource Areas: (See 310 CMR 10.25-10.35)

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.

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Designated Port Areas	Indicate size under Land Under the Ocean, below	
b. <input type="checkbox"/> Land Under the Ocean	1. square feet _____ 2. cubic yards dredged _____	
c. <input type="checkbox"/> Barrier Beach	Indicate size under Coastal Beaches and/or Coastal Dunes below	
d. <input type="checkbox"/> Coastal Beaches	1. square feet _____	2. cubic yards beach nourishment _____
e. <input type="checkbox"/> Coastal Dunes	1. square feet _____	2. cubic yards dune nourishment _____

Online Users:
Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the Department.



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B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
f. <input type="checkbox"/> Coastal Banks	1. linear feet _____	
g. <input type="checkbox"/> Rocky Intertidal Shores	1. square feet _____	
h. <input type="checkbox"/> Salt Marshes	1. square feet _____	2. sq ft restoration, rehab., creation _____
i. <input type="checkbox"/> Land Under Salt Ponds	1. square feet _____	
	2. cubic yards dredged _____	
j. <input type="checkbox"/> Land Containing Shellfish	1. square feet _____	
k. <input type="checkbox"/> Fish Runs	Indicate size under Coastal Banks, inland Bank, Land Under the Ocean, and/or inland Land Under Waterbodies and Waterways, above	
	1. cubic yards dredged _____	
l. <input type="checkbox"/> Land Subject to Coastal Storm Flowage	1. square feet _____	
4. <input type="checkbox"/> 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. square feet of BVW _____	b. square feet of Salt Marsh _____

C. Other Applicable Standards and Requirements

Streamlined Massachusetts Endangered Species Act/Wetlands Protection Act Review

1. Is any portion of the proposed project located in **Estimated Habitat of Rare Wildlife** as indicated on 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 *Massachusetts Natural Heritage Atlas* or go to <http://www.mass.gov/dfwele/dfw/nhosp/nhregmap.htm>.

a. Yes No **If yes, include proof of mailing or hand delivery of NOI to:**

**Natural Heritage and Endangered Species Program
Division of Fisheries and Wildlife
Route 135, North Drive
Westborough, MA 01581**

2008 _____
b. Date of map

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 complete Section C.1.d, 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).



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C. Other Applicable Standards and Requirements (cont'd)

1. c. Submit Supplemental Information for Endangered Species Review *

1. 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
3. 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 area & buffer zone)
 - (b) Photographs representative of the site
 - (c) MESA filing fee (fee information available at: <http://www.mass.gov/dfwele/dfw/nhosp/nhenvmesa.htm>)
Make check payable to "Natural Heritage & Endangered Species Fund" and **mail to NHESP** at above address
Projects altering 10 or more acres of land, also submit:
 - (d) Vegetation cover type map of site
 - (e) Project plans showing Priority & Estimated Habitat boundaries

d. OR Check One of the Following

1. Project is exempt from MESA review.
Attach applicant letter indicating which MESA exemption applies. (See 321 CMR 10.14, <http://www.mass.gov/dfwele/dfw/nhosp/nhenvexemptions.htm>; the NOI must still be sent to NHESP if the project is within estimated habitat pursuant to 310 CMR 10.37 and 10.59.)
2. Separate MESA review ongoing.

a. NHESP Tracking Number	b. Date submitted to NHESP
--------------------------	----------------------------
3. Separate MESA review completed.
Include copy of NHESP "no Take" determination or valid Conservation & Management Permit with approved plan.

* Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review (see www.nhosp.org regulatory review tab). 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.



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C. Other Applicable Standards and Requirements (cont'd)

2. For coastal projects only, is any portion of the proposed project located below the mean high water line or in a fish run?

a. Not applicable – project is in inland resource area only

b. Yes No If yes, include proof of mailing or hand delivery of NOI to either:

South Shore - Cohasset to Rhode Island, and the Cape & Islands:

North Shore - Hull to New Hampshire:

Division of Marine Fisheries -
Southeast Marine Fisheries Station
Attn: Environmental Reviewer
838 South Rodney French Blvd.
New Bedford, MA 02744

Division of Marine Fisheries -
North Shore Office
Attn: Environmental Reviewer
30 Emerson Avenue
Gloucester, MA 01930

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.

3. Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?

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

4. 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

5. 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

6. Is this project subject to provisions of the MassDEP Stormwater Management Standards?

a. 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:

1. 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.

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D. Additional Information

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.
3. Identify the method for BVW and other resource area boundary delineations (MassDEP BVW Field Data Form(s), Determination of Applicability, Order of Resource Area Delineation, etc.), and attach documentation of the methodology.
4. List the titles and dates for all plans and other materials submitted with this NOI.

Sewage Disposal System Plan - 67 Hammond Street - Acton, Massachusetts

a. Plan Title

Civil Solutions, Inc.

Kevin J. Ritchie, P.E.

b. Prepared By

c. Signed and Stamped by

1/30/2012

1" = 20'

d. Final Revision Date

e. Scale

f. Additional 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.
6. Attach proof of mailing for Natural Heritage and Endangered Species Program, if needed.
7. Attach proof of mailing for Massachusetts Division of Marine Fisheries, if needed.
8. Attach NOI Wetland Fee Transmittal Form
9. Attach Stormwater Report, if needed.

E. Fees

1. Fee Exempt: No filing fee shall be assessed for projects of any city, town, county, or district of the Commonwealth, federally recognized Indian tribe housing authority, municipal housing 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:

2791

2. Municipal Check Number

2/15/2012

3. Check date

2792

4. State Check Number

2/15/2012

5. Check date

Civil Solutions, Inc

6. Payor name on check: First Name

Civil Solutions, Inc

7. Payor name on check: Last Name



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Provided by MassDEP:

MassDEP File Number

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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.

1. Signature of Applicant

2. Date

3. Signature of Property Owner (if different)

4. Date

5. Signature of Representative (if any)

6. Date

3-5-12

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:

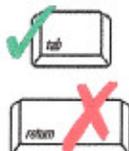
If the applicant has checked the "yes" box in any part of Section C, Item 3, above, refer to that section and the Instructions for additional submittal requirements.

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.



Massachusetts Department of Environmental Protection
 Bureau of Resource Protection - Wetlands
NOI Wetland Fee Transmittal Form
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

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



A. Applicant Information

1. Applicant:

Deborah Turner
 a. First Name b. Last Name

c. Organization
 67 Hammond Street
 d. Mailing Address

Acton MA 01720
 e. City/Town f. State g. Zip Code

978-263-9296
 h. Phone Number i. Fax Number j. Email Address

2. Property Owner (if different):

a. First Name b. Last Name

c. Organization

d. Mailing Address

e. City/Town f. State g. Zip Code

h. Phone Number i. Fax Number j. Email Address

3. Project Location:

67 Hammond Acton
 a. Street Address b. City/Town

B. Fees

The fee should be calculated using the following six-step process and worksheet. **Please see Instructions before filling out worksheet.**

Step 1/Type of Activity: Describe each type of activity that will occur in wetland resource area and buffer zone.

Step 2/Number of Activities: Identify the number of each type of activity.

Step 3/Individual Activity Fee: Identify each activity fee from the six project categories listed in the instructions.

Step 4/Subtotal Activity Fee: Multiply the number of activities (identified in Step 2) times the fee per category (identified in Step 3) to reach a subtotal fee amount. Note: If any of these activities are in a Riverfront Area in addition to another Resource Area or the Buffer Zone, the fee per activity should be multiplied by 1.5 and then added to the subtotal amount.

Step 5/Total Project Fee: Determine the total project fee by adding the subtotal amounts from Step 4.

Step 6/Fee Payments: To calculate the state share of the fee, divide the total fee in half and subtract \$12.50. To calculate the city/town share of the fee, divide the total fee in half and add \$12.50.

To calculate filing fees, refer to the category fee list and examples in the instructions for filling out WPA Form 3 (Notice of Intent).



Massachusetts Department of Environmental Protection
 Bureau of Resource Protection - Wetlands
NOI Wetland Fee Transmittal Form
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

B. Fees (continued)

Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
Replace existing failed sewage disposal system	1	\$110.00	\$110.00

Step 5/Total Project Fee: _____

Step 6/Fee Payments:

Total Project Fee:	\$110.00
State share of filing Fee:	a. Total Fee from Step 5 \$42.50
City/Town share of filling Fee:	b. 1/2 Total Fee less \$12.50 \$67.50
	c. 1/2 Total Fee plus \$12.50

C. Submittal Requirements

- a.) Complete pages 1 and 2 and send with a check or money order for the state share of the fee, payable to the Commonwealth of Massachusetts.

Department of Environmental Protection
 Box 4062
 Boston, MA 02211

- b.) **To the Conservation Commission:** Send the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and the city/town fee payment.

To MassDEP Regional Office (see Instructions): Send a copy of the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and a copy of the state fee payment. (E-filers of Notices of Intent may submit these electronically.)

**NOTIFICATION TO ABUTTERS
UNDER THE MASSACHUSETTS WETLANDS PROTECTION ACT
AND THE TOWN OF ACTON WETLANDS BYLAW**

In accordance with the second paragraph of Massachusetts General Laws Chapter 131, Section 40 and the Town of Acton Bylaws, you are hereby notified of the following:

The Applicant: Deborah Turner

Address 67 Hammond Street, Acton, MA Phone 978-263-9296

has filed a Notice of Intent with the Acton Conservation Commission seeking permission to remove, fill, dredge or alter an Area Subject to Protection under the Wetlands Protection Act.

Applicant's Representative: Civil Solutions, Inc. – Kevin Ritchie

Address 285 Littleton Road, Westford, MA Phone 978-692-5000

The address of the property where the activity is proposed 67 Hammond Street, Acton, MA

Town Atlas Platc/Map map E3 Parcel/Lot parcel 3

Project Description This project consists of replacing an existing failed sewage disposal system.

Copies of the Notice of Intent may be examined at the Conservation Office, Acton Town Hall, 472 Main Street, Acton between the hours of 9:00 A.M. and 4:30 P.M. Monday through Friday. For more information please call the Conservation Office at 978-929-6634.

A Public Hearing will be held at the Acton Town Hall, 472 Main Street, on Wednesday,
March 21, 2012 at 7:15 P.M.
(date)

The notice of the public hearing will be published at least five (5) days in advance in the Acton edition of the *Beacon* newspaper or *Metrowest Daily News*.

NOTE: You may also contact your local conservation commission or the nearest Department of Environmental Protection Regional Office* for the information about this application or, the Wetlands Protection Act. Acton is in the Central Region. To contact DEP, call:

***DEP Central Region: 508-792-7650
627 Main Street, Worcester MA 01608**



Brian McMullen
Assessor

Town of Acton
472 Main Street
Acton, MA 01720
Telephone 978-929-6621
Fax 978-929-6340

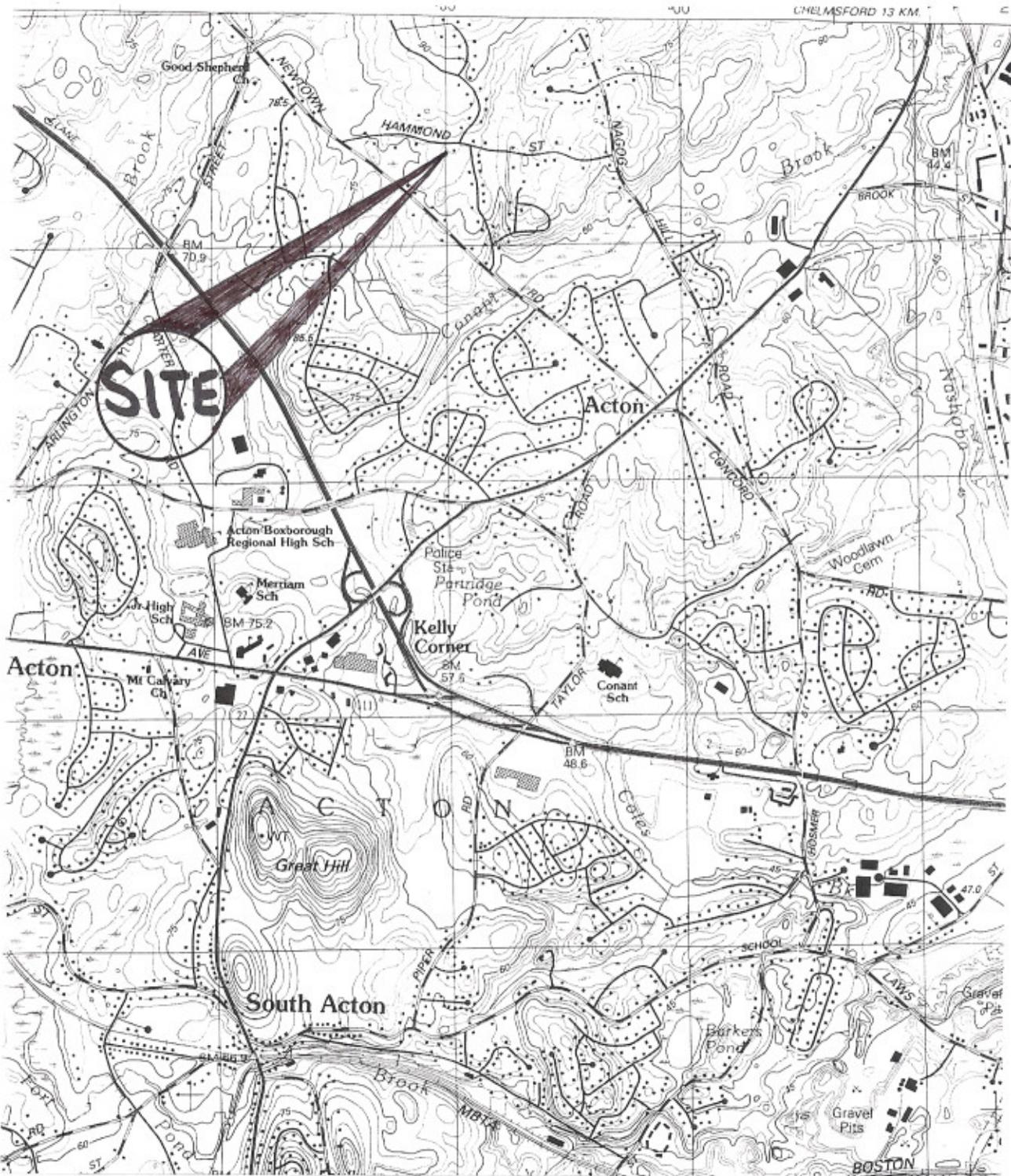
LOCUS 67 HAMMOND ST
PARCEL ID E3-3

Location	Parcel ID	Owner	Co-Owner	Mailing Address	City	ST	Zip
60 HAMMOND ST	D3-25	EDWARDS DAWN V	EDWARDS HOWARD R	60 HAMMONDS ST	ACTON	MA	01720
22 EVERGREEN RD	DE-27	GRAHAM BUILDERS INC		PO BOX 597	LOWELL	MA	01853
20 EVERGREEN RD	D3-32	GRAHAM BUILDERS INC		PO BOX 597	LOWELL	MA	01853
2 SAMUEL PARLIN DR	D3-23-10	IMMERMAN JAMES D	IMMERMAN JANICE F	2 SAMUEL PARLIN DR	ACTON	MA	01720
72 HAMMOND ST	D3-23-12	LYNCH MARTIN J	LYNCH MARTHA H	72 HAMMOND ST	ACTON	MA	01720
1 EVERGREEN WY	E3-3-1	PURCELL ELIZABETH A		1 EVERGREEN WY	ACTON	MA	01720
63 HAMMOND ST	E2-2	IVANOV ALEX	IVANOV ELIZABETH	63 HAMMOND ST	ACTON	MA	01720
18 EVERGREEN WY	E3-12	BUSSE DANIEL E	BUSSE NANCY G	18 EVERGREEN WY	ACTON	MA	01720

The owner of land sharing a common boundry or corner with the site of the proposed activity (100 feet) in any direction, including land located directly across a street, way, creek, river, stream, brook or canal. The above are as they appear on the most recent applicable taxes.

FEB 15,2012

Marty Abbott
Assessor Clerk

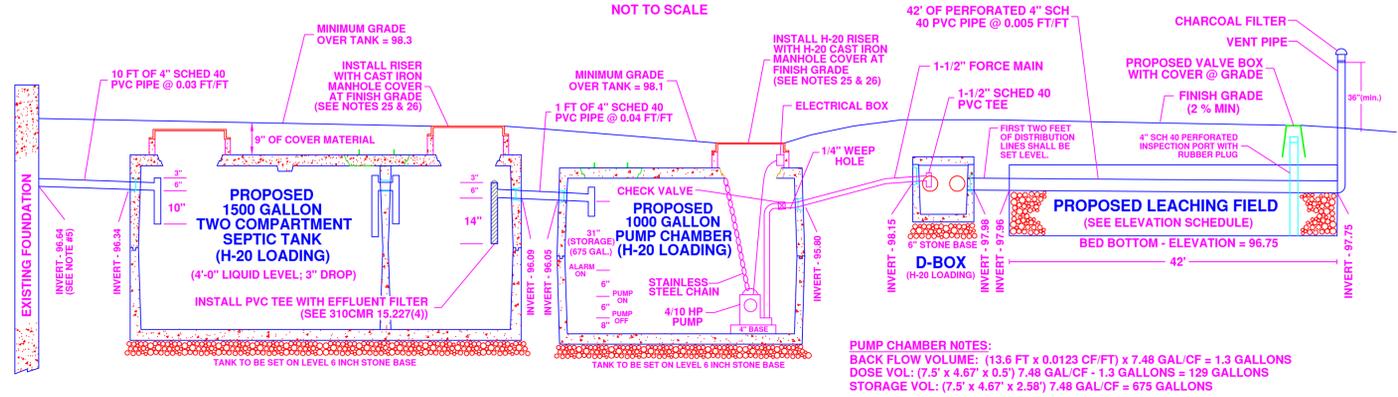


LOCUS PLAN
67 HAMMOND STREET
ACTON, MASSACHUSETTS

FEBRUARY 20, 2012

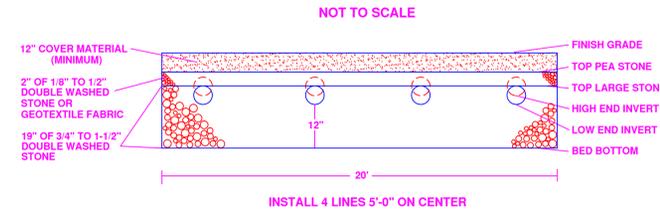
CIVIL SOLUTIONS, INC.
 P.O. BOX 107, 285 LITTLETON ROAD, SUITE 2, WESTFORD, MA
 PHONE: (978) 692-5000 FAX: (978) 692-0386

PROFILE AND DETAILS



PUMP CHAMBER NOTES:
 BACK FLOW VOLUME: (13.6 FT x 0.0123 CF/FT) x 7.48 GAL/CF = 1.3 GALLONS
 DOSE VOL: (7.5' x 4.67' x 0.5') 7.48 GAL/CF - 1.3 GALLONS = 129 GALLONS
 STORAGE VOL: (7.5' x 4.67' x 2.58') 7.48 GAL/CF = 675 GALLONS

CROSS SECTION



SCHEDULE OF ELEVATIONS			
ITEM	EXISTING	LEACHING FIELD	
TOP OF FOUNDATION	96.64	FINISH GRADE	99.50
OUT OF FOUNDATION	96.34	TOP PEA STONE	98.46
IN SEPTIC TANK	96.09	TOP LARGE STONE	98.29
OUT SEPTIC TANK	96.05	HIGH END INVERT	97.96
IN PUMP CHAMBER	96.15	LOW END INVERT	97.75
IN DISTRIBUTION BOX	97.98	BED BOTTOM	96.75

SOIL PROFILE DATA

TESTHOLE No. 1			TESTHOLE No. 2		
DEPTH	ELEV.		DEPTH	ELEV.	
0"	99.72	FILL	0"	99.75	FILL
60"	94.72	(to be removed)	64"	94.42	(to be removed)
84"	92.72 (ESHW)	SANDY LOAM S ₁ /S ₂	84"	92.75 (ESHW)	SANDY LOAM S ₁ /S ₂
114"	90.22		116"	90.08	

DATE: 8/25/2011
 ENG: K. RITCHIE, C.S.I.
 AGENT: J. SHAIR, ACTON BOH

DATE: 8/25/2011
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 AGENT: J. SHAIR, ACTON BOH

THE SOIL EVALUATOR FOR THIS SITE IS KEVIN RITCHIE. HE PASSED THE MA SOIL EVALUATOR EXAM SPRING 1995.

PERCOLATION TEST DATA

PERC No.	DATE	RATE
P-2	11/24/1976	20 MPI

PERCOLATION TEST TAKEN FROM ACTON BOARD OF HEALTH RECORD INFORMATION OF SOILS TESTING CONDUCTED ON THE SUBJECT PROPERTY. LOCATION OF PERCOLATION TEST NOT DETERMINED.

NOTES AND SPECIFICATIONS

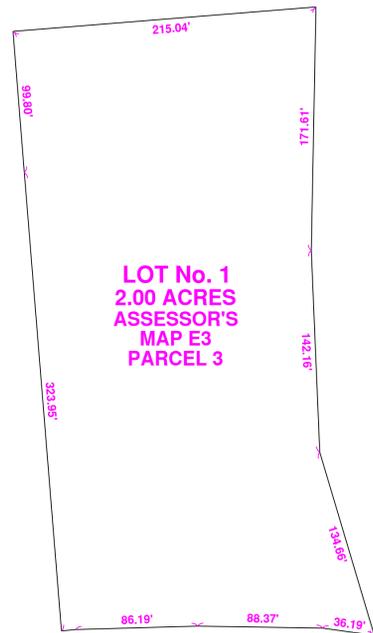
- BOUNDARY LINE INFORMATION TAKEN FROM A PLAN ENTITLED "LAND IN ACTON, MASS. SURVEY FOR VECHIONE CONSTRUCTION CO." BY CHARLES A. PERKINS CO., INC. DATED OCTOBER 1986, RECORDED IN THE M.S.D.R.D. AS PLAN No. 1655 OF 1986.
- TOPOGRAPHICAL INFORMATION TAKEN FROM A FIELD SURVEY PERFORMED BY THIS OFFICE.
- CONTRACTOR SHALL NOTIFY DIGSAFE (888) 344-7233 AT LEAST 72 HOURS PRIOR TO INITIATING WORK.
- CONTRACTOR SHALL NOTIFY THIS OFFICE 24 TO 48 HOURS PRIOR TO REQUIRED CONSTRUCTION INSPECTIONS.
- IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY ALL EXISTING SITE CONDITIONS AND ELEVATIONS PRIOR TO INITIATING CONSTRUCTION. ANY DISCREPANCIES SHALL BE REPORTED TO THE ENGINEER OF RECORD PRIOR TO THE ONSET OF CONSTRUCTION.
- CONTAMINATED SOIL WITHIN THE VICINITY OF THE PROPOSED LEACHING AREA SHOULD BE REMOVED BY THE CONTRACTOR. LOCATION OF EXISTING LEACHING AREA SHOWN HEREON IS APPROXIMATE AND WAS NOT FIELD LOCATED.
- WHERE FILL IS REQUIRED TO REPLACE UNSUITABLE OR IMPERVIOUS MATERIAL, THE EXCAVATION OF THE UNSUITABLE MATERIAL SHALL EXTEND A MINIMUM OF 3 FEET LATERALLY IN ALL DIRECTIONS BEYOND THE OUTER PERIMETER OF THE SOIL ABSORPTION SYSTEM TO A DEPTH OF NATURALLY OCCURRING PERVIOUS MATERIAL.
- FILL MATERIAL SHALL MEET THE SPECIFICATIONS ESTABLISHED IN 310 CMR 15.255.
- EXISTING DWELLING IS SERVICED BY A MUNICIPAL WATER SUPPLY. THIS DESIGN REQUIRES RELOCATION OF THE EXISTING WATER LINE. PROPOSED WATER LINE IS TO BE A MINIMUM OF 10 FEET FROM ANY PORTION OF THE PROPOSED SEPTIC SYSTEM.
- THIS SYSTEM IS NOT DESIGNED TO ACCOMMODATE GARBAGE DISPOSAL UNITS.
- RETURN WATER FROM HOME WATER FILTRATION SYSTEM SHALL NOT BE PIPED INTO THE SEPTIC SYSTEM.
- TANKS AND DISTRIBUTION BOX SHOWN HEREON ARE GRAPHICAL REPRESENTATIONS OF THE CONCRETE STRUCTURES REQUIRED, AND SHOULD NOT BE CONSIDERED CONSTRUCTION DRAWINGS. MANUFACTURER OF TANKS AND BOXES SHALL BE APPROVED BY THE ENGINEER OF RECORD AND THE BOARD OF HEALTH.
- ANY ALTERATION OF WETLANDS OR DISTURBANCE WITHIN THE 100 FOOT BUFFER ZONE SHALL REQUIRE A FILING WITH THE LOCAL CONSERVATION COMMISSION AND THE DEPARTMENT OF ENVIRONMENTAL PROTECTION. THIS DESIGN REQUIRES SUCH A FILING. EDGE OF WETLAND SHOWN HEREON WAS DELINEATED BY MOOSE ENVIRONMENTAL ON AUGUST 1, 2011.
- THIS PLAN MAY ONLY BE REVISED WITH THE CONSENT OF THE LOCAL BOARD OF HEALTH AND THE ENGINEER OF RECORD.
- EXISTING SEPTIC SYSTEM IS TO BE ABANDONED IN ACCORDANCE WITH 310 CMR 15.354 OR REMOVED AS NECESSARY.
- SUBJECT PROPERTY IS NOT LOCATED IN A NITROGEN SENSITIVE AREA AS SHOWN ON THE MASS GIS WEBSITE "DEP TITLE 5 SETBACK AREA," TOWN OF ACTON.
- THIS PLAN WAS CREATED FOR THE PURPOSES OF SHOWING A PROPOSED SEWAGE DISPOSAL SYSTEM AND IS NOT INTENDED TO BE USED TO ESTABLISH PROPERTY LINES.
- PUMP IS TO BE MANUFACTURED BY MYERS, MODEL ME40, 4/10 HP, 1600 RPM, SINGLE PHASE 115 VOLT PUMP. ANY SUBSTITUTION SHALL BE APPROVED BY THE ENGINEER PRIOR TO CONSTRUCTION. PUMP SHALL PROVIDE 88 GAL/MIN AT A T.O.P. OF 1.1 FEET.
- PUMP ALARM SHALL BE ON AN ELECTRICAL CIRCUIT SEPARATE FROM THE CIRCUIT SERVING THE PUMP.
- ALL SYSTEM COMPONENTS SHALL BE MARKED WITH MAGNETIC MARKING TAPE OR A COMPARABLE MEANS IN ORDER TO LOCATE THEM ONCE BURIED.
- THE LOCATION OF THE PROPOSED VENT PIPE IS VARIABLE. HOMEOWNER SHOULD DISCUSS THE PROPOSED LOCATION OF THE VENT PIPE PRIOR TO THE ONSET OF CONSTRUCTION.
- A FOUR INCH SCHEDULE 40 PERFORATED PIPE INSPECTION PORT IS TO BE INSTALLED IN THE LEACHING AREA. THE INSPECTION PORT SHALL BE LOCATED WITHIN A VALVE BOX WITH THE COVER SET AT FINISH GRADE.
- THE OUTLET TEE OF THE SEPTIC TANK SHALL BE EQUIPPED WITH A ZABEL A1800 FILTER AVAILABLE FROM ZABEL (800) 221-9742 OR EQUIVALENT.
- THE DEPARTMENT OF ENVIRONMENTAL PROTECTION REQUIRES THAT THE EFFLUENT FILTER IN THE OUTLET TEE OF THE SEPTIC TANK BE SERVICED AT LEAST ONCE PER YEAR. THIS OFFICE RECOMMENDS THAT THE EFFLUENT FILTER BE CHECKED AND CLEANED A MINIMUM OF EVERY 6 MONTHS.
- MANHOLE COVERS ARE REQUIRED TO BE CAST IRON. RISER AND COVER ON THE PUMP CHAMBER SHALL BE MET WITH H-20 LOADING REQUIREMENTS.
- COVERS OVER THE INLET AND OUTLET OF THE SEPTIC TANK SHALL BE MARKED TO INDICATE THAT AN EFFLUENT FILTER HAS BEEN INSTALLED IN THE OUTLET TEE.
- SEPTIC TANK SHALL HAVE ITS CONTENTS PUMPED OUT A MINIMUM OF ONCE EVERY TWO YEARS BY A SEPTAGE HAULER LICENSED BY THE TOWN OF ACTON.
- SUBJECT PROPERTY IS LOCATED IN THE AQUIFER PROTECTION AREA (ZONE 4) AS DEPICTED ON THE "GROUNDWATER PROTECTION DISTRICT MAP OF THE TOWN OF ACTON, JANUARY 1988."
- THE PORTION OF THE EXISTING PAVED DRIVEWAY FROM THE EDGE OF THE 5 FOOT CLEARING TO 3 FEET PAST THE PROPOSED WATERLINE IS TO BE REMOVED. ALL EXCAVATED PAVEMENT IS TO BE REMOVED FROM THE SITE. AREA OF DRIVEWAY REMOVAL SHALL BE LOAMED AND SEEDDED.

VARIANCES

1. NO KNOWN VARIANCES REQUIRED.

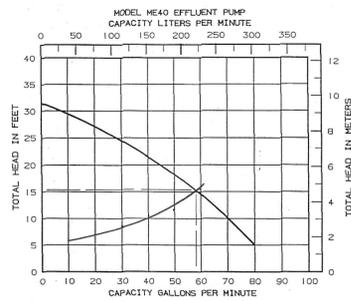
PLOT PLAN

1" = 60'

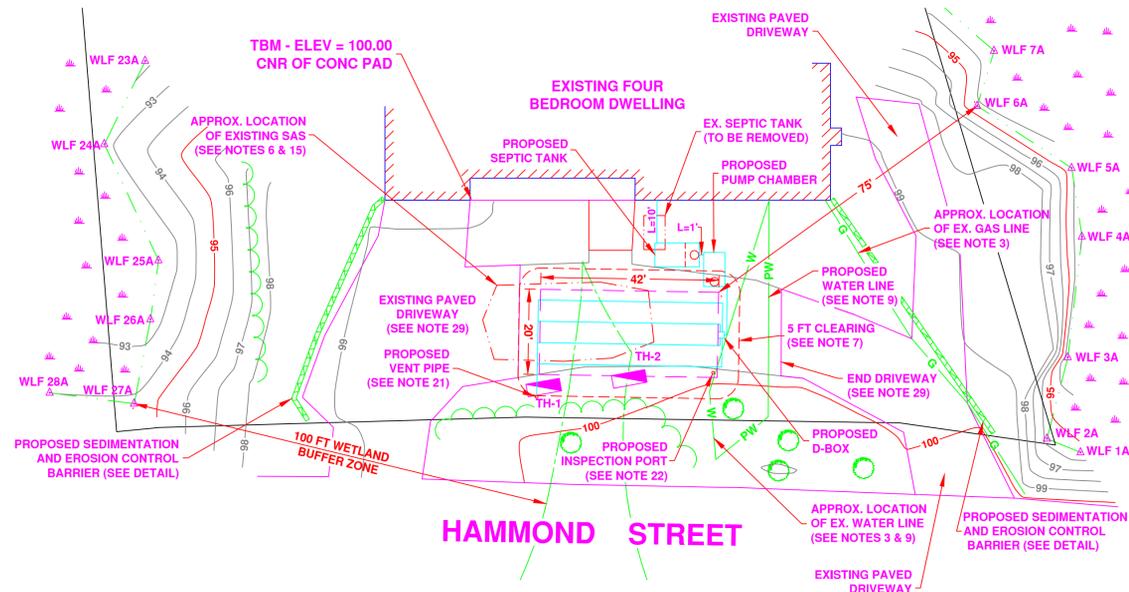
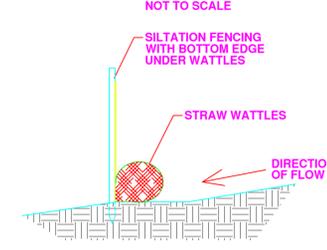


HAMMOND STREET

PERFORMANCE CURVE



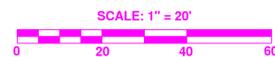
SEDIMENT AND EROSION CONTROL DETAIL



HAMMOND STREET

LEGEND

- EXISTING STUMP
- EXISTING TREE
- LIGHT POST
- EXISTING SPOT GRADE
- PROPOSED SPOT GRADE
- SOIL PROFILE TEST
- PERCOLATION TEST
- EXISTING CONTOUR
- PROPOSED CONTOUR
- EXISTING WATER LINE
- PROPOSED WATER LINE
- GAS LINE
- BRUSHLINE



SYSTEM CALCULATIONS

TITLE 5 DESIGN CAPACITY PROVIDED:
 4 BEDROOMS X 110 GAL/BEDROOM = 440 GAL/DAY
 REQUIRED BY ACTON BOARD OF HEALTH:
 4 BEDROOMS REQUIRES 800 SF OF LEACHING AREA

PROVIDED:
 PERCOLATION RATE: 20 MINUTES/INCH
 APPLICATION RATE: 0.53 GAL/SF

TOTAL LEACHING AREA: 20' W X 42' L = 840 SF
 TOTAL VOL APPLIED/DAY: 840 SF X 0.53 GAL/SF = 445 GAL
 APPROVED CAPACITY: 4 BEDROOM

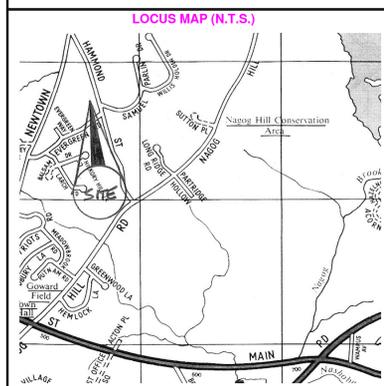
SEPTIC TANK SIZING:
 200% X 440 GPD = 880 GALLONS
 INSTALL NEW 1500 GALLON TWO COMPARTMENT SEPTIC TANK

SEWAGE DISPOSAL SYSTEM PLAN

67 HAMMOND STREET
 ACTON, MASSACHUSETTS

JANUARY 30, 2012

ASSESSOR'S MAP E3, PARCEL 3		DESIGN: KCF
CIVIL SOLUTIONS, INC. P.O. BOX 107, 285 LITTLETON ROAD, SUITE 2, WESTFORD, MA PHONE: (978) 692-5000 FAX: (978) 692-0386		DRAWN: KCF
SHEET 1 OF 1		CHECK: KJR
SCALE 1"=20'	JOB NO. 11-047	DWG. NO. 11-047P
OWNER OF RECORD: DEBORAH TURNER 67 HAMMOND STREET ACTON, MA 01720	# 1	DATE 2/29/2012
PLAN PREPARED FOR: R.M. RATTA CORPORATION 81A WESTFORD ROAD AYER, MA 01432		REVISION
		BY KJR



From: CERO_NOI@MassMail.state.ma.us
To: civilsolutions@verizon.net
Cc: ceronoi@state.ma.us; [Conservation Commission](#); ceronoi@state.ma.us
Subject: MassDEP NOI File Number
Date: Friday, March 16, 2012 2:33:25 PM

COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF ENERGY & ENVIRONMENTAL AFFAIRS
DEPARTMENT OF ENVIRONMENTAL PROTECTION
CENTRAL REGIONAL OFFICE
627 MAIN STREET, WORCESTER, MA 01608 508-792-7650

Date: 03/16/2012

Municipality ACTON

RE: **NOTIFICATION OF WETLANDS PROTECTION ACT FILE NUMBER**

The Department of Environmental Protection has received a Notice of Intent filed in accordance with the Wetlands Protection Act (M.G.L. c. 131, §40):

Applicant DEBORAH TURNER Address 67 HAMMOND ST,ACTON MA 01720 Locus 67 HAMMOND ST , ACTON MA 01720	Owner Address
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This project has been assigned the following file # : **CE 085-1086**
ISSUANCE OF A FILE NUMBER INDICATES ONLY COMPLETENESS OF
SUBMITTAL, NOT APPROVAL OF APPLICATION

Although a file # is being issued, please note the following:
NONE NOTED.

Regards,
for MassDEP,

(508)-767-2709
Joseph.Bellino@State.MA.US