



Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Wetlands

Acton
City/Town

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:

Town of Acton Natural Resources Department
Name
472 Main Street
Mailing Address
Acton
City/Town
978-929-6634
Phone Number
ttidman@acton-ma.gov
E-Mail Address
MA
State
01720
Zip Code
Fax Number (if applicable)

2. Representative (if any):

Town of Acton
Firm
Steve Ledoux
Contact Name
472 Main Street
Mailing Address
Acton
City/Town
manager@acton-ma.gov
E-Mail Address
MA
State
01720
Zip Code
Fax Number (if applicable)

B. Determinations

1. I request the Acton 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:

Town of Acton Wetlands Bylaw
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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C. Project Description

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

2 Taylor Road

Street Address

F-3A

Assessors Map/Plat Number

Acton

City/Town

76

Parcel/Lot Number

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

A well will be installed in a developed area of the Arboretum, near the Taylor Road main entrance (see attached locus map)

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

Acton Town Atlas

Title

Aerial photo - digital mapping

Title

Acton Arboretum Well Location Plan

Title

8/2015

Date

Date

9/21/2015

Date

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

The Town of Acton, Natural Resources Department, will contract with a qualified well driller to install a bedrock well in the Acton Arboretum. The proposed location of the well will be approximately 75 feet from the edge of wetlands. The well will be used to water the Arboretum's gardens and specimen plantings.



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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).

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 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:

Town of Acton, Arboretum; Conservation Land

Name

472 Main Street

Mailing Address

Acton

City/Town

MA

State

01720

Zip Code

Signatures:

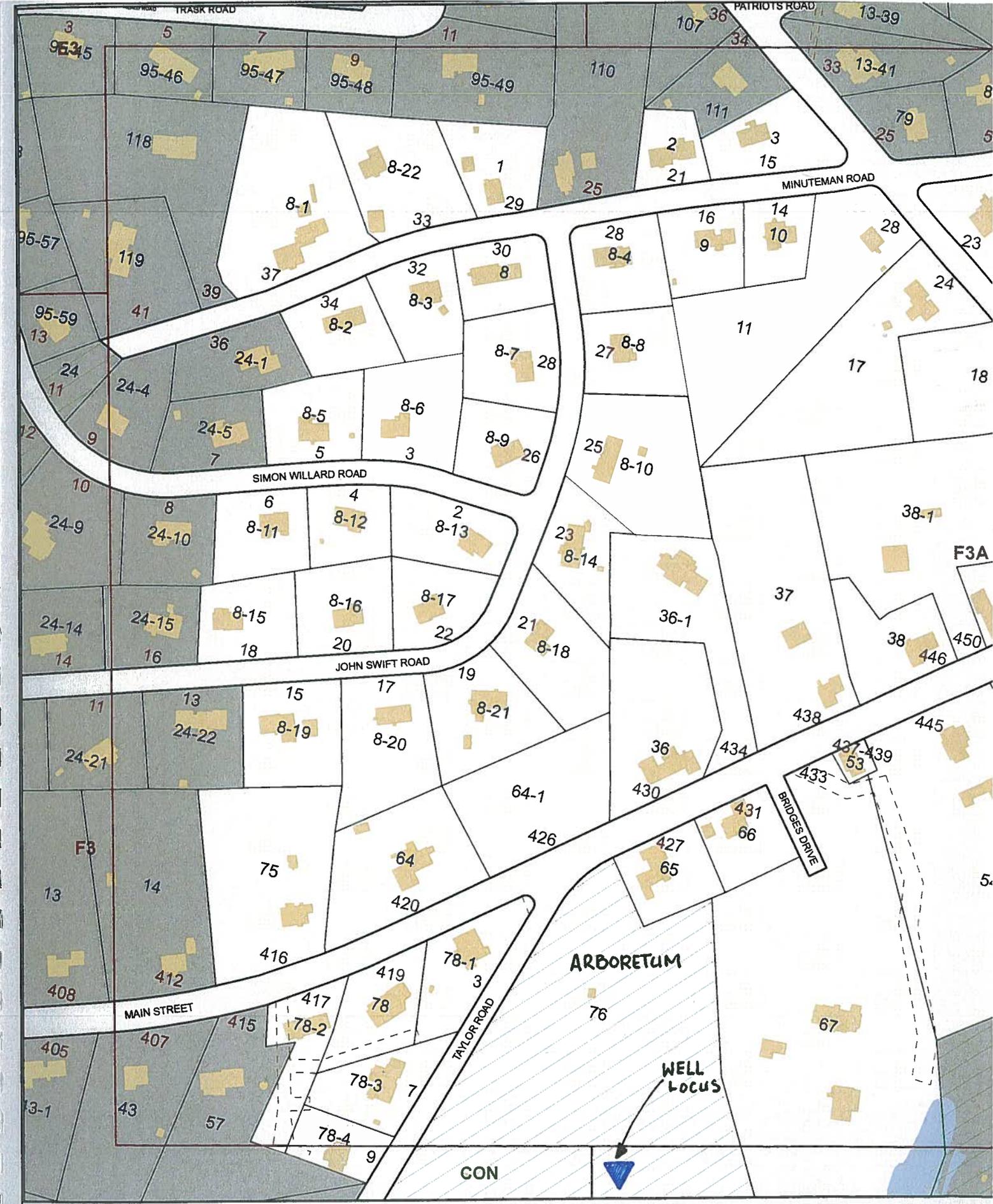
I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

Signature of Applicant

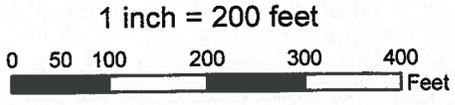
Date

Signature of Representative (if any)

Date



- LEGEND**
- Water Bodies
 - Target Map Parcels
 - Adjacent Map
 - Easements
 - Building
 - 10-5 Parcel Number
 - 21 Street Address
 - Municipal Land
(Municipal Land List on cover sheet)



TOWN
MASS