



TOWN OF FAIRHAVEN, MASSACHUSETTS

CONSERVATION COMMISSION

Town Hall · 40 Center Street · Fairhaven, MA 02719

APPLICATION CHECKLIST REQUEST FOR DETERMINATION OF APPLICABILITY

Required Payments -You must include **two separate checks** made out to the *Town of Fairhaven*:

- ☐ **Check 1: \$75.00** (Advertising fee)
- ☐ **Check 2: Filing Fee** (*Select the one that applies to your project*):
 - ☐ **\$150.00** – Single-family project
 - ☐ **\$300.00** – Single-family project (After-the-fact)
 - ☐ **\$300.00** – Commercial project
 - ☐ **\$600.00** – Commercial project (After-the-fact)

The Packet Components - Prepare **two (2) collated physical packets** (1 original, 1 copy). Each packet must contain:

- ☐ **WPA Form 1:** Completely filled out and signed.
- ☐ **Project Narrative:** A brief description of the work (e.g., hand vs. equipment use, material storage, site access).
- ☐ **Project Plans:** Blueprints or drawings showing:
 - Locus map (USGS Quad topo map)
 - Resource areas and their **50-foot** and **100-foot** buffer lines
 - 200-foot Riverfront Area & FEMA Flood Zone boundaries (*if applicable*)
 - Existing vs. proposed structures/vegetation (include trees 8"dbh or greater)
 - Shortest distance from disturbed areas to resource areas
 - Erosion and sedimentation controls (*if applicable*)
- ☐ **Abutters List:** Certified list of neighbors within 100 feet.
- ☐ **Notification to Abutters Form:** Filled out and mailed certified by you.
- ☐ **Proof of Abutter Notification:** Certified mail receipts or hand delivery signatures
(*Failure to present proof will result in the Conservation Commission NOT hearing your application*)

Delivery & Copies - Ensure your completed application is distributed as follows:

- ☐ **To MassDEP Southeast Region:** *Certified* Mail **1 complete copy** of the packet to:

*MA Department of Environmental Protection
Southeast Regional Office
20 Riverside Drive
Lakeville, MA 02347*

- ☐ **To Fairhaven Conservation Commission:** Deliver the 2 physical packets, 2 checks and proof of certified mailing to MassDep. (*Failure to present proof will result in the Conservation Commission NOT hearing your application*)

- ☐ **Digital Copy:** Submit one full electronic copy of the packet emailed to: Conservation@fairhaven-ma.gov



Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Wetlands

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:

Name _____

E-Mail Address _____

Mailing Address _____

City/Town _____

State _____

Zip Code _____

Phone Number _____

Fax Number (if applicable) _____

2. Representative (if any):

Firm _____

Contact Name _____

E-Mail Address _____

Mailing Address _____

City/Town _____

State _____

Zip Code _____

Phone Number _____

Fax Number (if applicable) _____

B. Determinations

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

- ☐ 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:

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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City/Town

C. Project Description

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

Street Address

City/Town

Assessors Map/Plat Number

Parcel/Lot Number

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

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

Title

Date

Title

Date

Title

Date

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



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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:

Name

Mailing Address

City/Town

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.

Signature of Applicant

Date

Signature of Representative (if any)

Date