

Massachusetts Department of Environmental Protection Bureau of Resource Protection - Wetlands

City/Town Scituate

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 1. Applicant: return kev.





Name & Robert DiBenedetto E-Mail Address

Mailing Address POBOX 449

City/Town Humarock

State MA

Zip Code 02047

Phone Number 781 424 8212

Fax Number (if applicable)

2. Representative (if any):

Contact Name

F-Mail Address

gin adibenedetto a rocketmail.com

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

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

Street Address 13 Garfield Street CityTown Humarock

Assessors Map/Plat Number

Parcel/Lot Number

- b. Area Description (use additional paper, if necessary):
- Corner Lot
- Sand area

c. Plan and/or Map Reference

Title

Date

Title

Date

Date

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

 - -Build sun deck as per plan Less than 30 inches above grade
 - 3 hand dug concrete footings to be poured in place.

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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.)

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 Robert DiBenedetto

Mailing Address POBOX 449

City/Town Humarock

State MA

Zip Code OZO47

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.

6-20-2020

Date

Signature of Representative (if any)

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