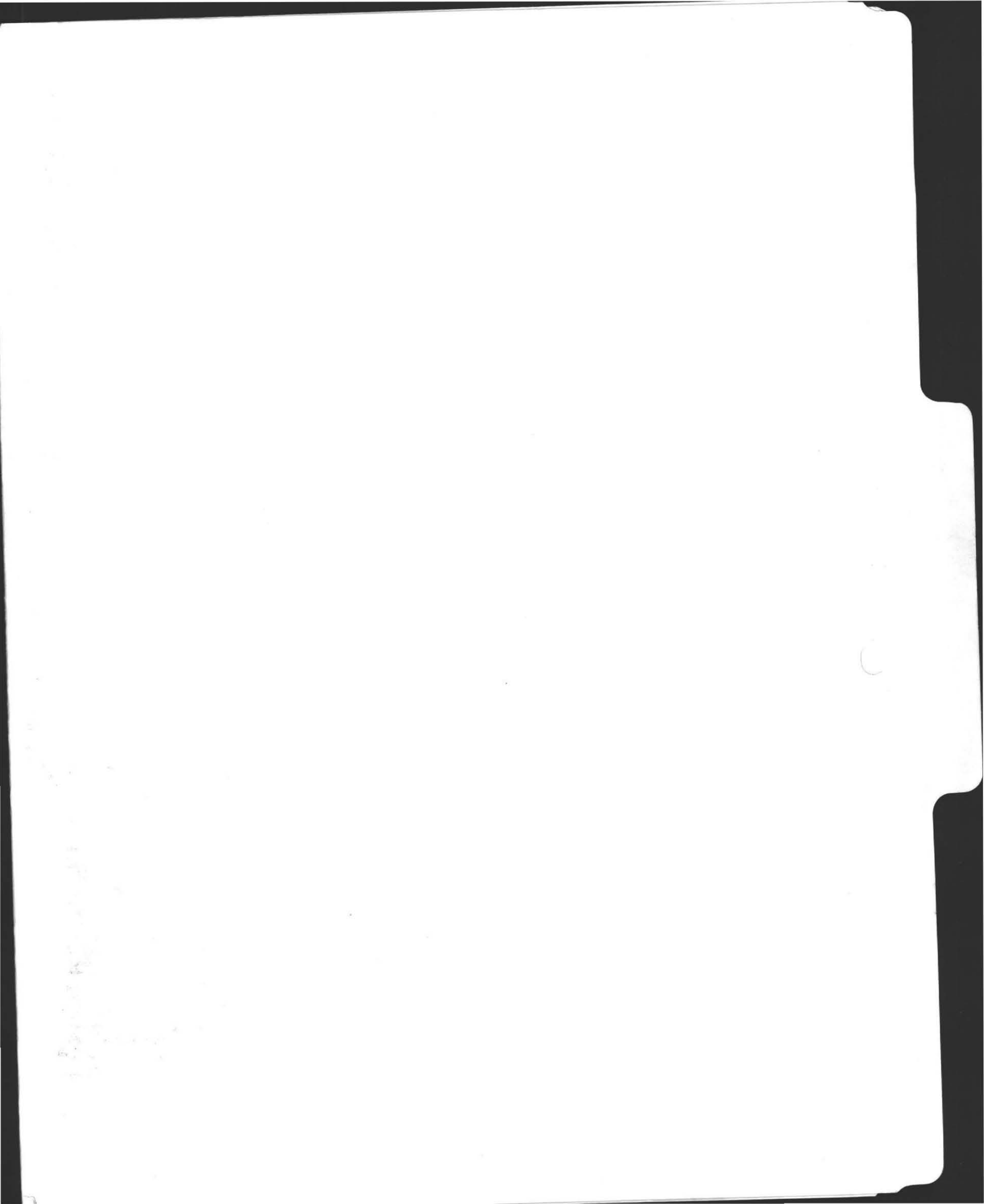


34 Overlook Drive



#34

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

APPLICATION FOR DISPOSAL WORKS CONSTRUCTION PERMIT

No. 7-15 Date 8/6/71 Fee 3.00 Date Rec'd. 8/9/71 By D.G.F.

Application is hereby made for a permit to Construct ( ) or Repair ( ) an Individual Sewage Disposal System at:

Location—Address 34 OVERLOOK DR. or Lot No. 18

Owner KOY INDUSTRIES Address \_\_\_\_\_

Contractor SAME Address \_\_\_\_\_

Type of Building RESIDENCE Dimensions \_\_\_\_\_ Size Lot \_\_\_\_\_

Dwelling—No. of Bedrooms 5 Expansion Attic ( ) Garbage Grinder (X)

Other \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( )

Other fixtures \_\_\_\_\_

Town Water? NO Type of Well DRILLED (BEDROCK)

Design Flow 50 gallons per person per day. Total daily flow 625 gallons

Septic Tank—Liquid capacity 1200 gallons Dimensions: L \_\_\_\_\_ W \_\_\_\_\_ D \_\_\_\_\_

Disposal Trench—No. 1 Width 18 Total Length 32 Total leaching area 576 sq. ft.

Disposal Bed—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Total leaching area \_\_\_\_\_ sq. ft.

Dry Well—No. \_\_\_\_\_ Diameter \_\_\_\_\_ Depth below inlet \_\_\_\_\_ Dimensions: \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

Other: Distribution box ( ) No. \_\_\_\_\_ Dosing tank ( )

(Depth of Soil Line Below finished grade at foundation \_\_\_\_\_)

Percolation Test Results Performed by Kendall G. Hunt Date \_\_\_\_\_

Test Pit No. 1 7 minutes per inch Depth of Test Pit 32"

Test Pit No. 2 \_\_\_\_\_ minutes per inch Depth of Test Pit \_\_\_\_\_

Description of Soil SM glacial till Depth to Ground Water UNKNOWN

Will disposal area be filled? NO Cut down? NO

(On reverse side or separate sheet, show plot plan with building. Include dimensions, distances from all boundaries. Show location of wells, streams, ledge, large trees, etc.)

AGREEMENT: The undersigned agrees to construct the aforescribed individual sewage disposal system in accordance with the provisions of Article XI of the Sanitary Code and regulations of the Amherst Board of Health. The undersigned further agrees not to place the system in operation until a Certificate of Compliance has been issued by this board of health.

Application Approved by C. C. Drake, Jr. R. J. [Signature] Owner or builder 8/9/71 date 8/9/71 date

Application Disapproved for the following reasons:

BOARD OF HEALTH, AMHERST, MASSACHUSETTS

CERTIFICATE OF COMPLIANCE

THIS IS TO CERTIFY, That the individual Sewage Disposal System installed ( ) or repaired ( ) by \_\_\_\_\_ at \_\_\_\_\_ has been constructed in accordance with the provisions of

INSTALLER

Article XI of the State Sanitary Code as described in the application for Disposal Works Construction Permit No. \_\_\_\_\_ dated \_\_\_\_\_

The issuance of this certificate shall not be construed as a guarantee that the system will function satisfactorily.

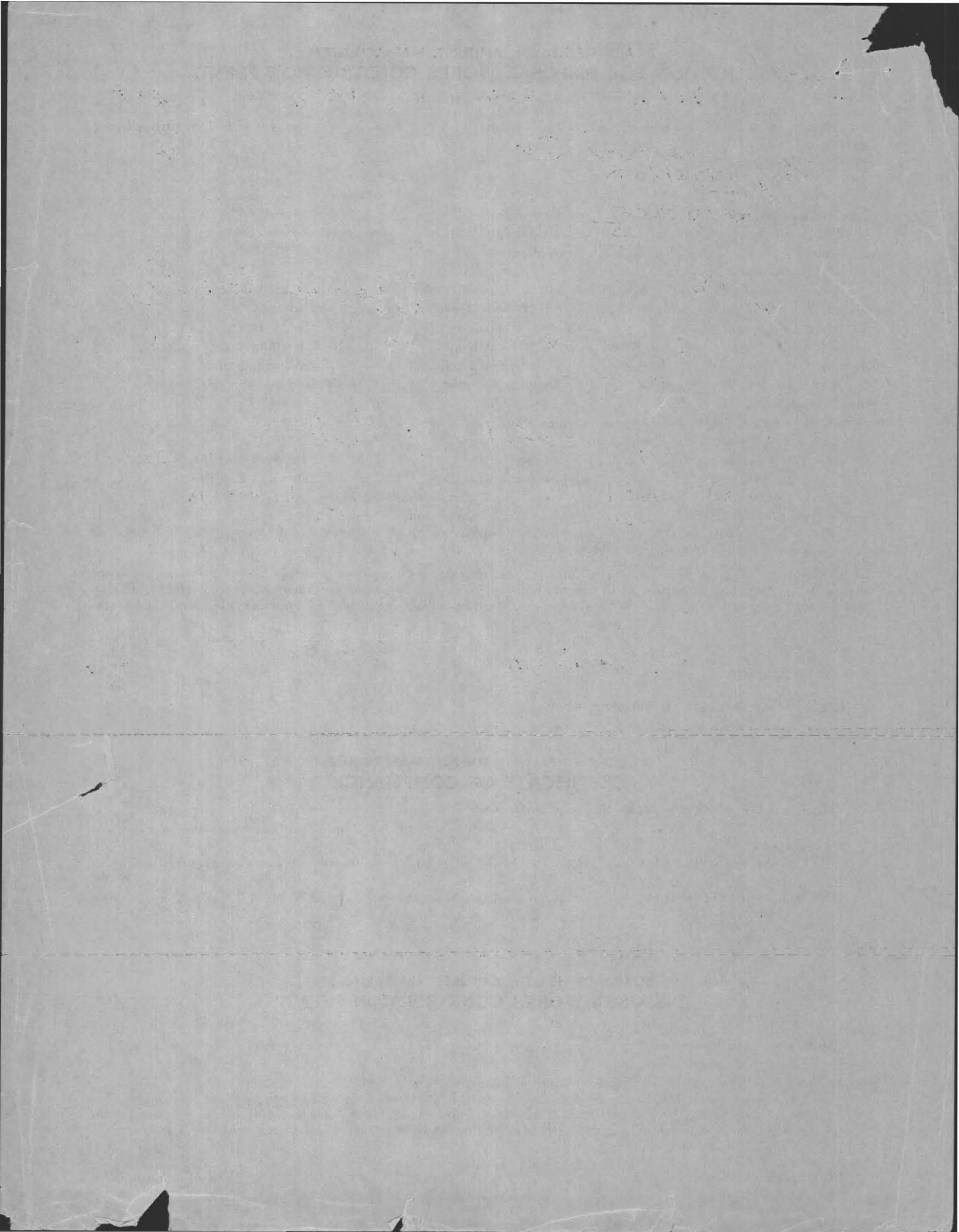
DATE \_\_\_\_\_ Inspector \_\_\_\_\_

BOARD OF HEALTH, AMHERST, MASSACHUSETTS  
DISPOSAL WORKS CONSTRUCTION PERMIT

No. \_\_\_\_\_ Permission is hereby granted \_\_\_\_\_ to construct ( ) or repair ( ) an Individual Sewage Disposal System at \_\_\_\_\_ as shown on the application for Disposal Works Construction Permit No. \_\_\_\_\_

This permit is issued with the understanding that future alterations or additions will be made if necessary. This permit shall not be construed as permission to create or maintain any sewage nuisance and in the issuance of this permit the Board of Health assumes no responsibility for the future operation or maintenance of the system.

DATE \_\_\_\_\_ Board of Health





**W.D. COWLS, INC.**  
**LAND COMPANY**

134 MONTAGUE RD.  
P.O. BOX 9677  
NORTH AMHERST, MA 01059

TEL (413) 549-1403  
FAX (413) 549-0000

Post-It® Fax Note	7671	Date	10/19	# of pages	1
To	Dave Z	From	Epi Bode		
Co./Dept.	L.S.	Co.	Health		
Phone #	033	Phone #	077		
Fax #	076	Fax #	053		

October 6, 1999

Amherst Board of Health  
Bangs Community Center  
Boltwood Walk  
Amherst, MA 01002

and Amherst Health Inspector  
Inspection Services  
Town Hall, 4 Boltwood Ave.  
Amherst, MA 01002

**Subject:** Variance application by Daniel & Sandra Moulton for a septic system on their vacant lot on Overlook Drive in Amherst

Dear Members of the Board of Health:

W.D. Cowls, Inc. owns the strip of land abutting the west side of Moulton' vacant lot, very close to the proposed mound for their new septic system.

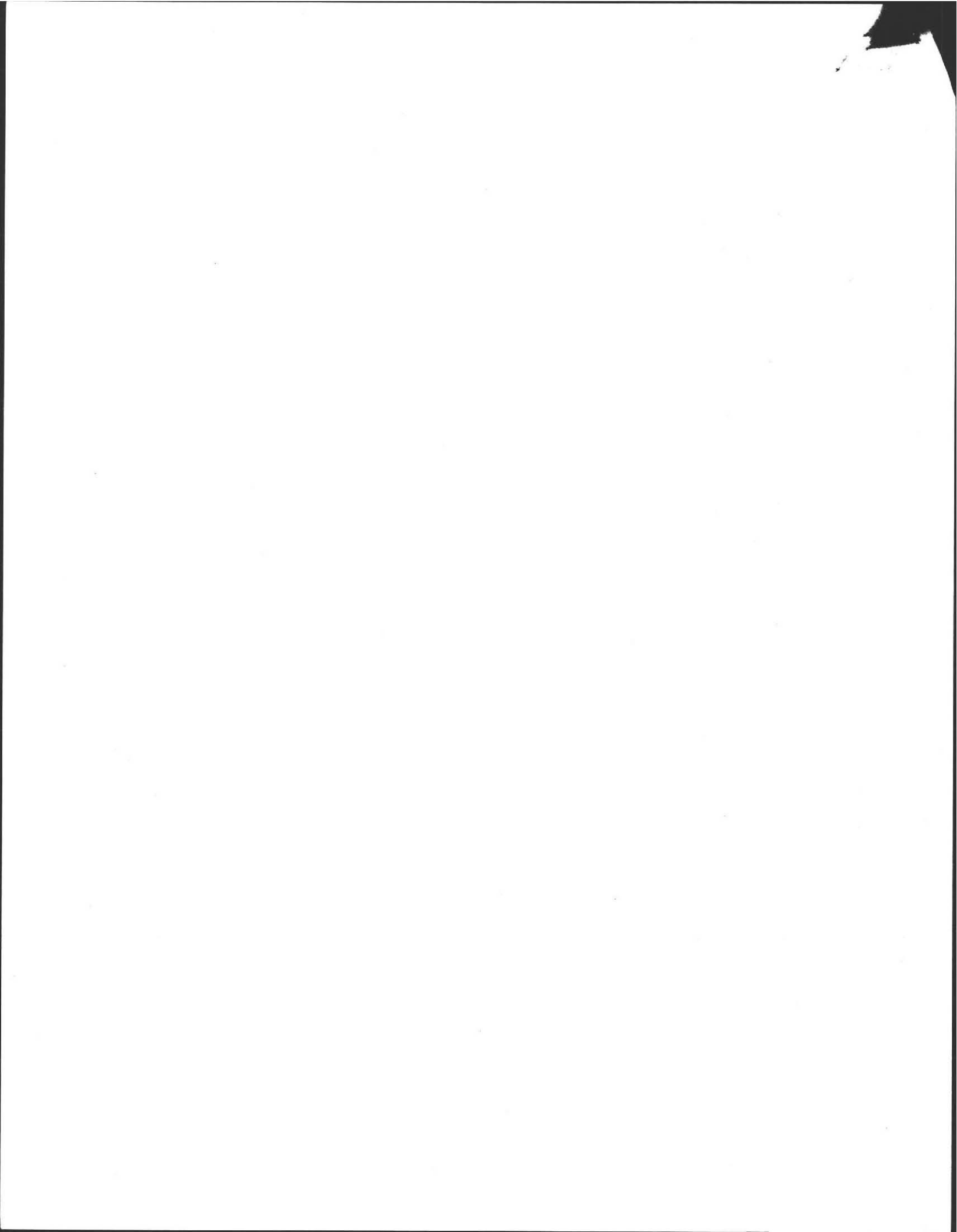
We have no problem with the variance the Moultons have requested.

If the Moultons have any other concerns about their land or ours, I hope they will call me directly at the W.D. Cowls, Inc. office (549-1403).

Very truly yours,

Paul C. Jones, President  
W.D. Cowls, Inc.

cc: Daniel & Sandra Moulton, 34 Overlook Dr., Amherst, MA 01002  
Robert Stover, P.O. Box 3312, Amherst, MA 01004-3312  
Michael Pill, P.O. Box 242, Shutesbuty, MA 01072





## WELL COMPLETION REPORT

W-32-00

<b>WELL LOCATION</b>		<b>GEOGRAPHIC DESCRIPTION</b>	
Address <u>From Flat Hill Rd take</u> <u>Overlook Dr 0.2 on left lot 186</u>		50 <u>(feet)</u> <u>(circle)</u> N S E W of <u>(circle)</u>	
City/Town <u>Amherst</u>		<u>Overlook Drive</u> <u>(road)</u>	
Well owner <u>dan Moulton</u>		0.2 <u>(mi. in tenths)</u> N S E W of <u>(circle)</u>	
Address <u>34 Overlook Drive</u> ✓ <u>Amherst MA 01002</u>		intersect. w/ <u>Flat Hill</u> <u>(road)</u>	
Board of Health permit obtained: yes <input type="checkbox"/> no <input type="checkbox"/>			

<b>WELL USE</b>		<b>WELL DATA</b>	
Domestic <input type="checkbox"/> Public <input type="checkbox"/> Industrial <input type="checkbox"/>		Total well depth <u>445'</u> ft.	
Monitoring <input type="checkbox"/> Other _____		Depth to bedrock <u>15'</u> ft.	
Method drilled <u>Air Hammer</u>		Water-bearing rock/unconsolidated material:	
Date drilled <u>5/1/00</u>		Description <u>Quartz shale</u>	
<b>CASING</b>		Water-bearing zones:	
Type <u>17 lb. Steel</u>		1) From <u>235</u> To <u>355</u>	
Length <u>60</u> ft. Dia.(I.D.) <u>6</u> in.		2) From _____ To _____	
Length into bedrock <u>43</u> ft.		3) From _____ To _____	
Protective well seal:		Gravel pack well: dia. _____	
Grout <input type="checkbox"/> Other <u>Seal</u>		Screen: dia. _____	
		Slot # _____ length _____ from _____ to _____	

**STATIC WATER LEVEL (all wells)**  
 Static water level below land surface 27 ft. Date 5/2/00

**WELL TEST (production wells)** Blowtest  
 Drawdown 190 ft. after pumping 1 hr. 45 min. at 5 gpm  
 How measured bucket Recovery 27 ft. after 1 hr. 45 min.

LOG of FORMATIONS		
Materials	From	To
Gravel	0	15
Ledge	15	360
Bedrock	360	445

## COMMENTS

Driller Kenneth C. Lynde  
 Firm Lynde Well Drilling, Inc.  
 Address 5345 Hinesburg Road  
 City/Town Guilford, VT 05301-1803  
 Supervising Driller Reg.# 480

*Kenneth C. Lynde*  
 Signature of supervising registered well driller

Office use only



Well Name: From Flat Hill Rd Lake

Location: Overlook Dr 0.5 on left lot 188

County: Amherst

Owner: Dan Moulton

Address: 34 Overlook Drive

Amherst MA 01002

Overlook Drive

0.5

Flat Hill

Yes  No

Well Data

151

151

51100

7 lb steel

261

*Prints attached*

27 1/2

blowest

45

190

45

shucker

Kenneth G. Lynde

Lynde Well Drilling Inc.

5315 Hainesburg Road

Windsor, VT 05301-1807

480

*James G. Lynde*





Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

**WPA Form 2 – Determination of Applicability**

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

**B. Determination (cont.)**

The following Determination(s) is/are applicable to the proposed site and/or project relative to the Wetlands Protection Act and regulations:

**Positive Determination**

Note: No work within the jurisdiction of the Wetlands Protection Act may proceed until a final Order of Conditions (issued following submittal of a Notice of Intent or Abbreviated Notice of Intent) has been received from the issuing authority (i.e., Conservation Commission or the Department of Environmental Protection).

- 1. The area described on the referenced plan(s) is an area subject to protection under the Act. Removing, filling, dredging, or altering of the area requires the filing of a Notice of Intent.
- 2a. The boundary delineations of the following resource areas described on the referenced-plan(s) are confirmed as accurate. Therefore, the resource area boundaries confirmed in this Determination are binding as to all decisions rendered pursuant to the Wetlands Protection Act and its regulations regarding such boundaries for as long as this Determination is valid.

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- 2b. The boundaries of resource areas listed below are not confirmed by this Determination, regardless of whether such boundaries are contained on the plans attached to this Determination or to the Request for Determination.

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- 3. The work described on referenced plan(s) and document(s) is within an area subject to protection under the Act and will remove, fill, dredge, or alter that area. Therefore, said work requires the filing of a Notice of Intent.
- 4. The work described on referenced plan(s) and document(s) is within the Buffer Zone and will alter an Area subject to protection under the Act. Therefore, said work requires the filing of a Notice of Intent.
- 5. The area and/or work described on referenced plan(s) and document(s) is subject to review and approval by:

\_\_\_\_\_  
Name of Municipality

Pursuant to the following municipal wetland ordinance or bylaw:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Ordinance or Bylaw Citation





Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

**WPA Form 2 – Determination of Applicability**

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

**B. Determination (cont.)**

- 5. The area described in the Request is subject to protection under the Act. Since the work described therein meets the requirements for the following exemption, as specified in the Act and the regulations, no Notice of Intent is required:

Exempt Activity (site applicable statutory/regulatory provisions)

- 6. The area and/or work described in the Request is not subject to review and approval by:

Name of Municipality

Pursuant to a municipal wetlands ordinance or bylaw.

Name

Ordinance or Bylaw Citation

**C. Authorization**

This Determination is issued to the applicant and delivered as follows:

- by hand delivery on
- by certified mail, return receipt requested on

Date

February 26, 2001  
Date

This Determination is valid for **three years** from the date of issuance (except Determinations for Vegetation Management Plans which are valid for the duration of the Plan). This Determination does not relieve the applicant from complying with all other applicable federal, state, or local statutes, ordinances, bylaws, or regulations.

This Determination must be signed by a majority of the Conservation Commission. A copy must be sent to the appropriate DEP Regional Office (see Appendix A) and the property owner (if different from the applicant).

Signatures:

*Arthur J....*  
*Hanna...*  
*Beyonce Mitchell*  
*Jim Ellis*

February 14, 2001

Date

OK - Pw



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

**WPA Form 2 – Determination of Applicability**

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

**B. Determination (cont.)**

6. The following area and/or work, if any, is subject to a municipal ordinance or bylaw but not subject to the Massachusetts Wetlands Protection Act:

7. If a Notice of Intent is filed for the work in the Riverfront Area described on referenced plan(s) and document(s), which includes all or part of the work described in the Request, the applicant must consider the following alternatives. (Refer to the wetland regulations at 10.58(4)c. for more information about the scope of alternatives requirements):

- Alternatives limited to the lot on which the project is located.
- Alternatives limited to the lot on which the project is located, the subdivided lots, and any adjacent lots formerly or presently owned by the same owner.
- Alternatives limited to the original parcel on which the project is located, the subdivided parcels, any adjacent parcels, and any other land which can reasonably be obtained within the municipality.
- Alternatives extend to any sites which can reasonably be obtained within the appropriate region of the state.

**Negative Determination**

Note: No further action under the Wetlands Protection Act is required by the applicant. However, if the Department is requested to issue a Superseding Determination of Applicability, work may not proceed on this project unless the Department fails to act on such request within 35 days of the date the request is post-marked for certified mail or hand delivered to the Department. Work may then proceed at the owner's risk only upon notice to the Department and to the Conservation Commission. Requirements for requests for Superseding Determinations are listed at the end of this document.

1. The area described in the Request is not an area subject to protection under the Act or the Buffer Zone.
2. The work described in the Request is within an area subject to protection under the Act, but will not remove, fill, dredge, or alter that area. Therefore, said work does not require the filing of a Notice of Intent.
3. The work described in the Request is within the Buffer Zone, as defined in the regulations, but will not alter an Area subject to protection under the Act. Therefore, said work does not require the filing of a Notice of Intent, subject to the following conditions (if any).

4. The work described in the Request is not within an Area subject to protection under the Act (including the Buffer Zone). Therefore, said work does not require the filing of a Notice of Intent, unless and until said work alters an Area subject to protection under the Act.



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

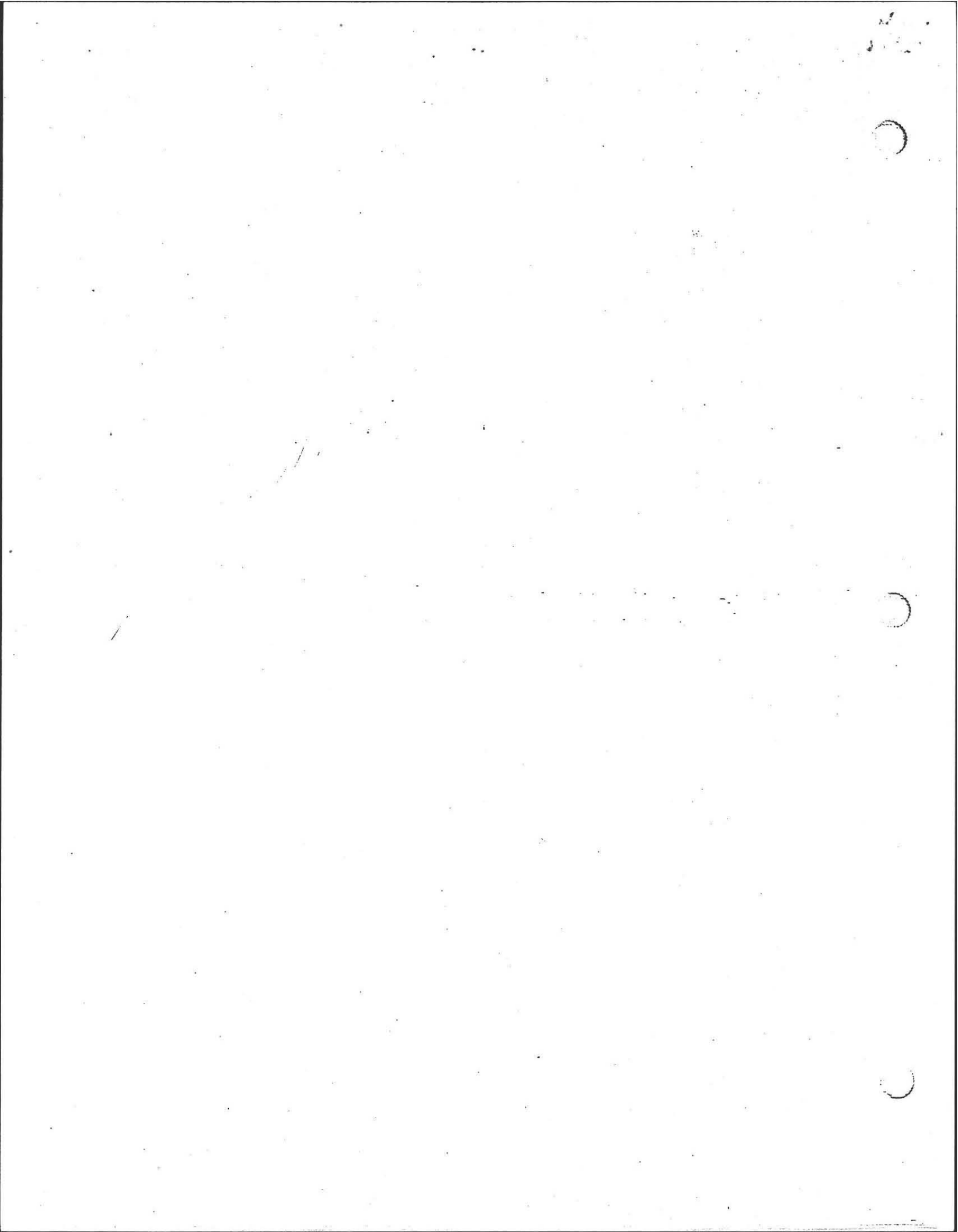
**WPA Form 2 – Determination of Applicability**

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

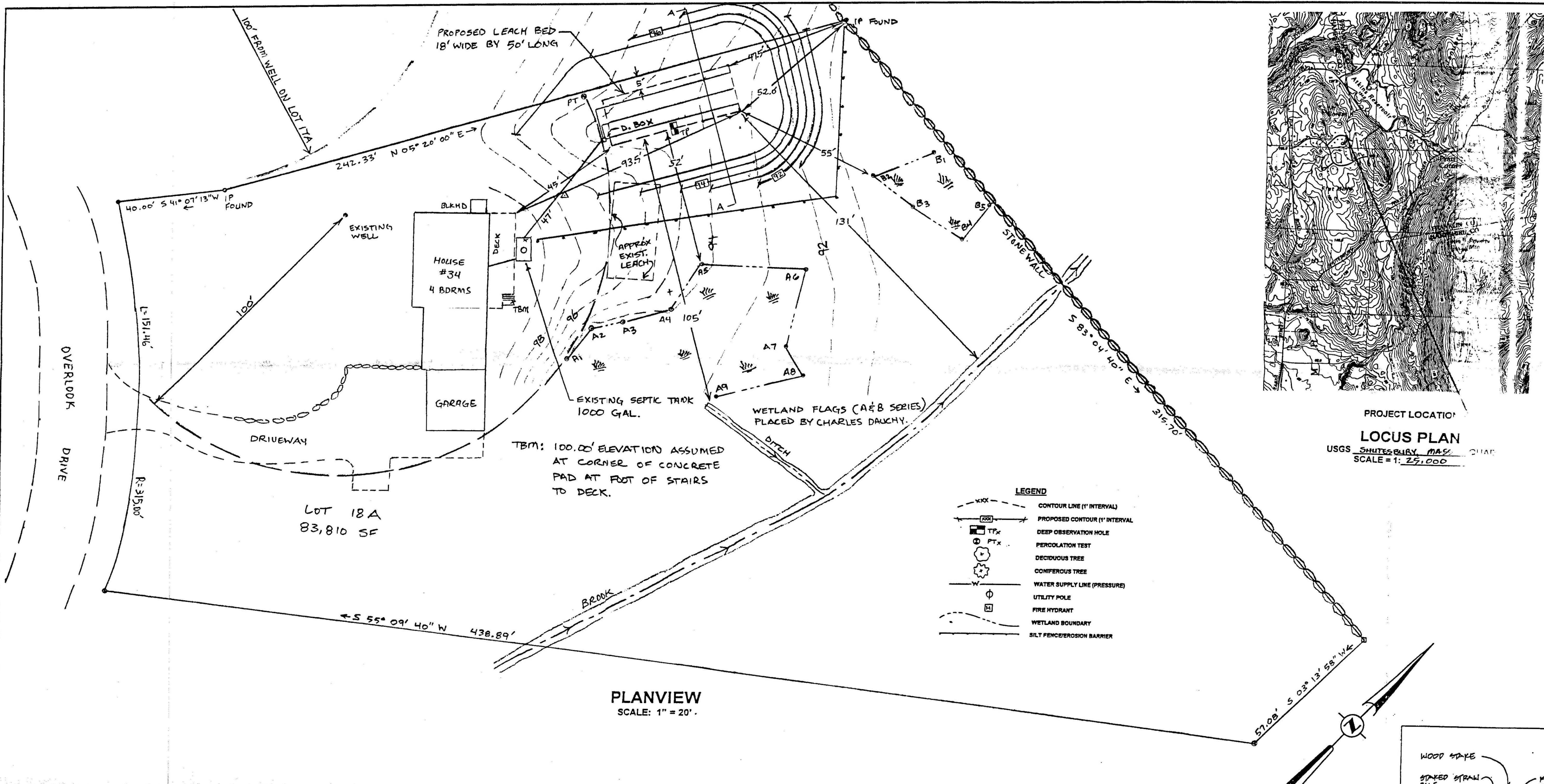
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**D. Appeals**

The applicant, owner, any person aggrieved by this Determination, any owner of land abutting the land upon which the proposed work is to be done, or any ten residents of the city or town in which such land is located, are hereby notified of their right to request the appropriate Department of Environmental Protection Regional Office (see Appendix A) to issue a Superseding Determination of Applicability. The request must be made by certified mail or hand delivery to the Department, with the appropriate filing fee and Fee Transmittal Form (see Appendix E: Request for Departmental Action Fee Transmittal Form) as provided in 310 CMR 10.03(7) within ten business days from the date of issuance of this Determination. A copy of the request shall at the same time be sent by certified mail or hand delivery to the Conservation Commission and to the applicant if he/she is not the appellant. The request shall state clearly and concisely the objections to the Determination which is being appealed. To the extent that the Determination is based on a municipal ordinance or bylaw and not on the Massachusetts Wetlands Protection Act or regulations, the Department of Environmental Protection has no appellate jurisdiction.







**SOIL INVESTIGATION**  
 Test PR 1 EL. 94.17'  
 Estimated Seasonal High Ground Water EL. 92.50'  
 Bedrock EL. 86.17'  
 Class II soils.

Water supply wells within 200 feet and wetland resource areas within 100 feet of the proposed soil absorption system are as shown on the planview. Deep observation hole log and percolation test results are in attached Soil Suitability Report. Soil Investigation and percolation testing by Robert Stover, Certified Soil Evaluator, and witnessed for the Board of Health by David Laczynski on 3/10/00 + 10/31/00.

**DESIGN CRITERIA**  
 Design flow is for a 4 bedroom house without a garbage grinder. Retain existing septic tank: 1000 gallons.

**DESIGN CALCULATION**

Required Flow: 110 gpd per bedroom.  
 Total required flow = 440 gpd.

Effluent Loading Rate: Percolation Rate = 3 minutes per inch.  
 Class II soils.  
 Effluent Loading Rate = 0.53 gpd/sf.

Proposed soil absorption system: one leach bed 18' wide x 50' long

Bottom Area: 18' x 50' = 900 sf  
 Sidewall Area: Not allowed = 0 sf  
 Total Leaching Area: 900 sf

900 sf x 0.53 gpd/sf = 477 gpd  
 Total Required Capacity = 477 gpd = 440 gpd (OK)

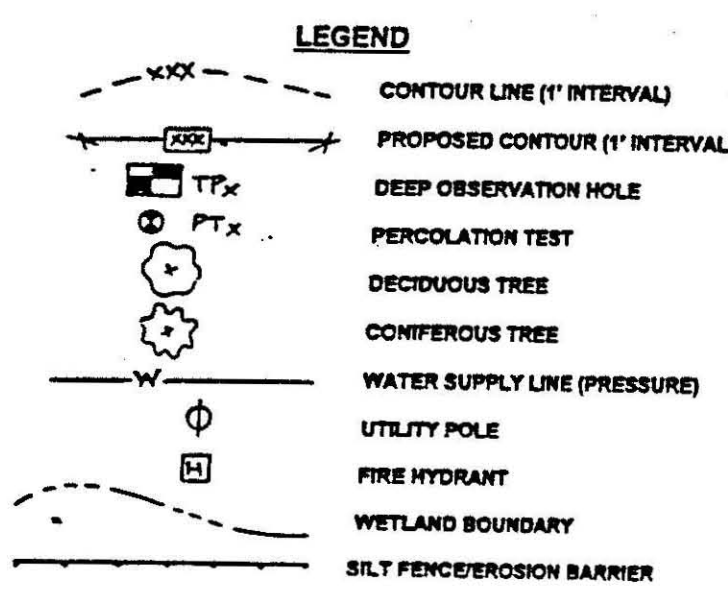
**GENERAL CONDITIONS**

- This system repair plan is prepared in accordance with Title 5, 310 CMR 15.00. Construction shall conform to these regulations.
- The installer shall notify the designer of any unusual conditions and shall not modify the plan without the written consent of the designer.
- All debris in the site area shall be removed and disposed of in accordance with the law.
- There is no guarantee expressed or implied to any user of a system installed pursuant to this plan.
- The installer shall notify the designer and the Board of Health when the system installation is complete and prior to placement of the cover material for final inspection. Notification shall be 48 hours prior to the time of inspection.
- The on-site sewage disposal system shall be pumped and inspected as necessary and at least once every 3 years.

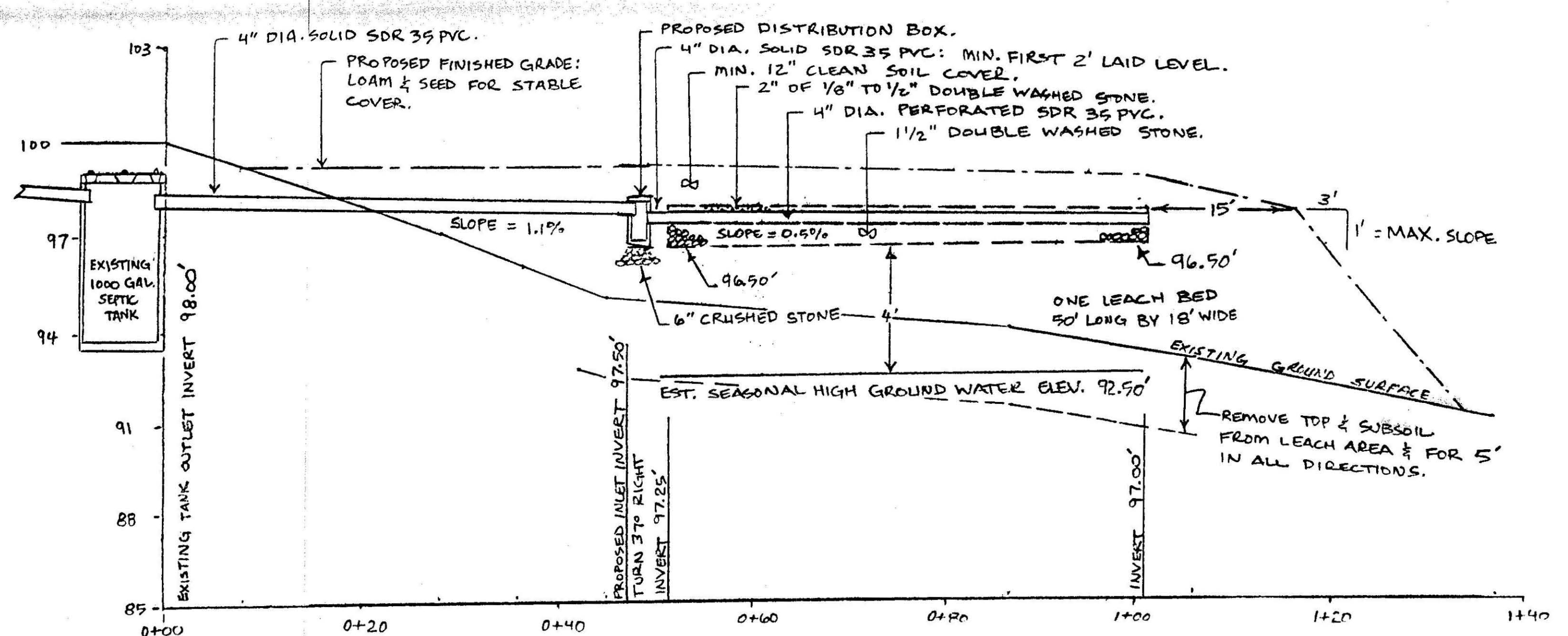
**CONSTRUCTION NOTES**

- Any topsoil, subsoil, stumps, stones, debris or other impervious materials encountered during excavation shall be removed from the area of the leaching trenches, from five feet around the trenches and from wherever fill is to be placed. Any fill placed in or adjacent to the trenches shall be a clean granular sand & conform to the specifications of Title 5, 310 CMR 15.255(3).
- The finished grade above the soil absorption system shall have a minimum two percent slope to shed surface runoff away from the system.
- Disturbed areas shall be loamed, seeded and mulched until stable vegetation is established.
- The pipes exiting the distribution box shall have the same invert elevation and shall be level for a minimum of the first two feet.
- Any part of existing soil absorption system encountered during excavation shall be disposed of in accordance with the requirements of the Board of Health.
- Any part of the system that shall be located in an area subject to vehicular traffic shall be capable of withstanding H-20 wheel loads.
- Existing septic tank and its tee/baffles shall be inspected to ensure that they are structurally sound and functional.

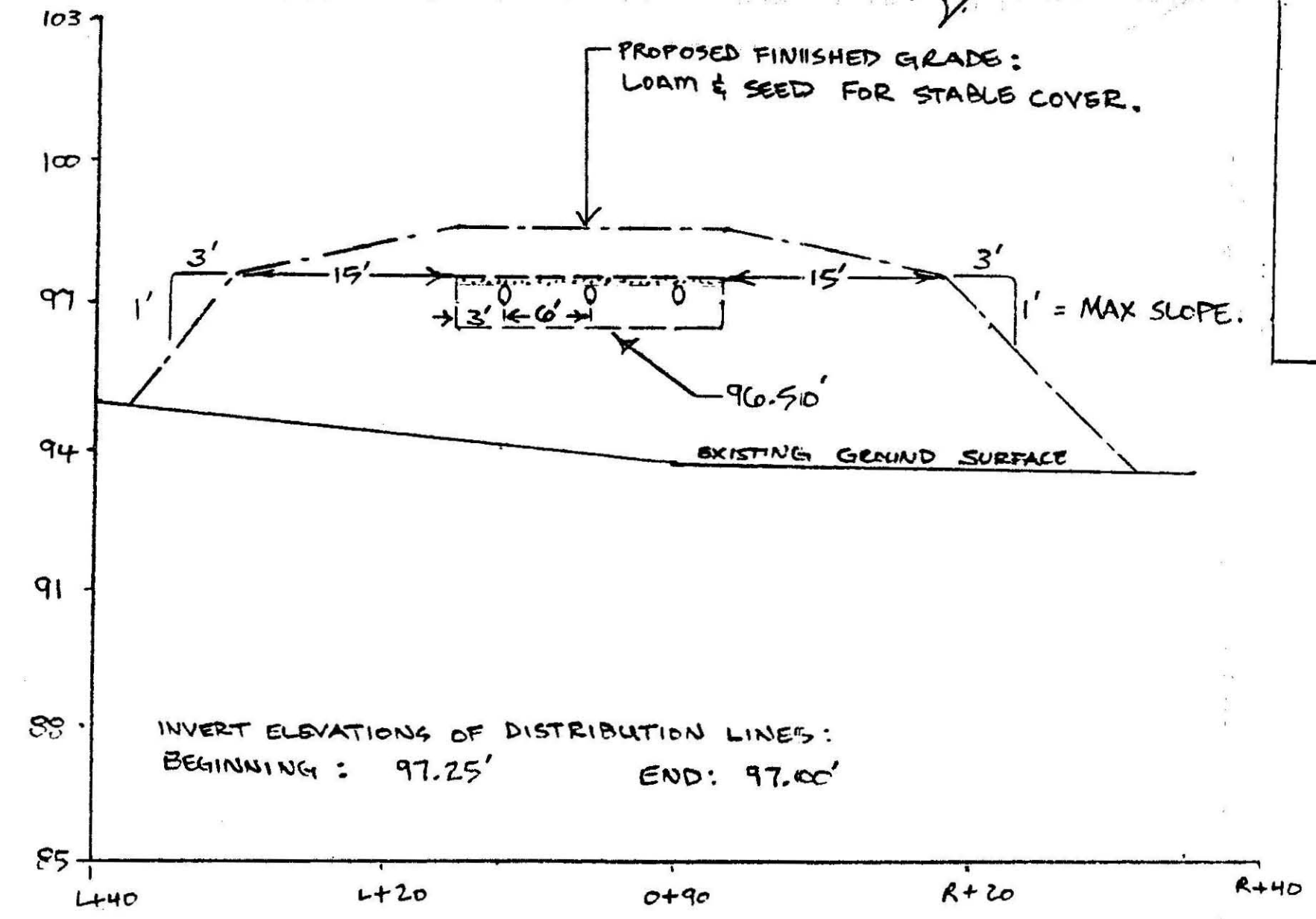
PROJECT LOCATION  
**LOCUS PLAN**  
 USGS SHUTEGBURY MASS. QUART.  
 SCALE = 1" = 25,000'



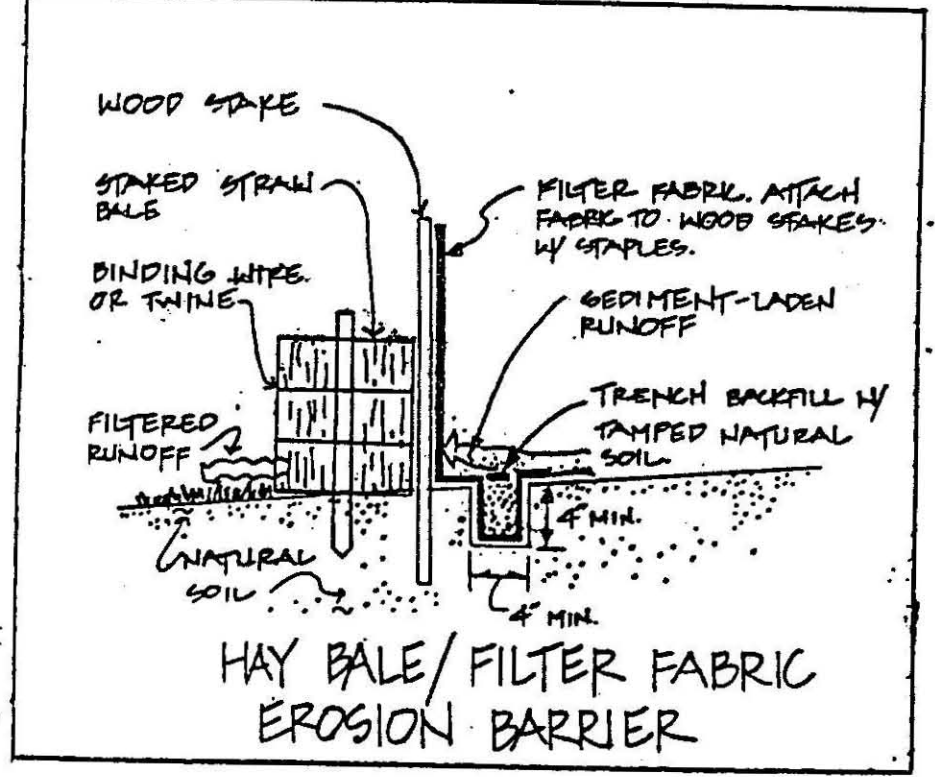
**PLANVIEW**  
 SCALE: 1" = 20'



**PROFILE OF SYSTEM**  
 SCALE: H: 1" = 10' V: 1" = 3'



**SECTION AT "A-A": LEACH BED**  
 SCALE: H: 1" = 10' V: 1" = 3'



1/2/01

**SEWAGE DISPOSAL SYSTEM REPAIR PLAN**  
 34 OVERLOOK DRIVE, AMHERST, MA

**DANIEL AND SANDRA C. MOULTON**  
 34 OVERLOOK DRIVE, AMHERST, MA 01002

SCALE: AS SHOWN APPROVED BY: DRAWN BY: AMS  
 DATE: 1/2/01

**AMHERST CIVIL ENGINEERING**  
 RICHARD COSTA, P.E. / ROBERT STOVER

P.O. BOX 3312, AMHERST, MA 01004-3312 DRAWING NUMBER: (413)256-3400



No. 01-02

THE COMMONWEALTH OF MASSACHUSETTS

FEE 75<sup>00</sup>

BOARD OF HEALTH

Town OF Amherst

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

Application for a Permit to Construct ( ) Repair  Upgrade ( ) Abandon ( ) -  Complete System  Individual Components

<u>34 Overlook Dr.</u> Location	<u>Daniel &amp; Sandra C. Moulton</u> Owner's Name
<u>18A</u> Map/Parcel #	<u>34 Overlook Dr, Amherst, MA</u> Address
<u>Richard Roberts</u> Installer's Name	<u>(413)256-6731</u> Telephone #
<u>Leverett, Mass</u> Address	<u>Robert Stover</u> Designer's Name
<u></u> Telephone #	<u>P.O. Box 3312, Amherst, MA 01004-3312</u> Address
	<u>(413)256-3400</u> Telephone #

Type of Building: single family house Lot Size 83,810 Sq. feet  
 Dwelling — No. of Bedrooms 4 Garbage Grinder ( )  
 Other — Type of Building \_\_\_\_\_ No. of persons \_\_\_\_\_ Showers ( ), Cafeteria ( )  
 Other fixtures \_\_\_\_\_

Design Flow (min. required) 440 gpd Calculated design flow 477 gpd Design flow provided \_\_\_\_\_ gpd  
 Plan: Date 1/2/2001 Number of sheets 1 Revision Date \_\_\_\_\_  
 Title "Sewage Disposal System Repair Plan"

Description of Soil(s) Attached  
 Soil Evaluator Form No. \_\_\_\_\_ Name of Soil Evaluator Robert Stover Date of Evaluation 3/10/00 + 10/31/00

DESCRIPTION OF REPAIRS OR ALTERATIONS replace existing failed S.A.S. with a leach bed 18' long wide by 50' long.

The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of TITLE 5 and further agrees not to place the system in operation until a Certificate of Compliance has been issued by the Board of Health.

Signed [Signature] Date 1/3/01

Inspections \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FORM 1 - APPLICATION FOR DSCP DEP APPROVED FORM 5/96

No. 01-02

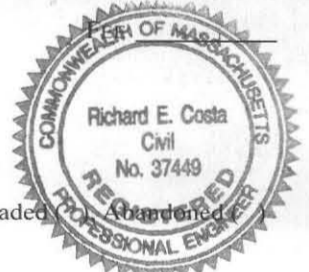
THE COMMONWEALTH OF MASSACHUSETTS

Amherst BOARD OF HEALTH

CERTIFICATE OF COMPLIANCE

Description of Work:  Individual Component(s)  Complete System

The undersigned hereby certify that the Sewage Disposal System; Constructed ( ), Repaired ( ) Upgraded   
 by: Daniel & Sandra C. Moulton  
 at 34 Overlook Drive  
 has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. 01-02 dated \_\_\_\_\_ Approved Design Flow \_\_\_\_\_ (gpd)



Installer [Signature]  
 Designer: Robert Stover 5/17/2001 Inspector [Signature] Date 5/17/01

The issuance of this certificate shall not be construed as a guarantee that the system will function as designed.

FORM 3 - CERTIFICATE OF COMPLIANCE DEP APPROVED FORM 5/96

No. 01-02

THE COMMONWEALTH OF MASSACHUSETTS

FEE 75<sup>00</sup>

Amherst BOARD OF HEALTH

DISPOSAL SYSTEM CONSTRUCTION PERMIT

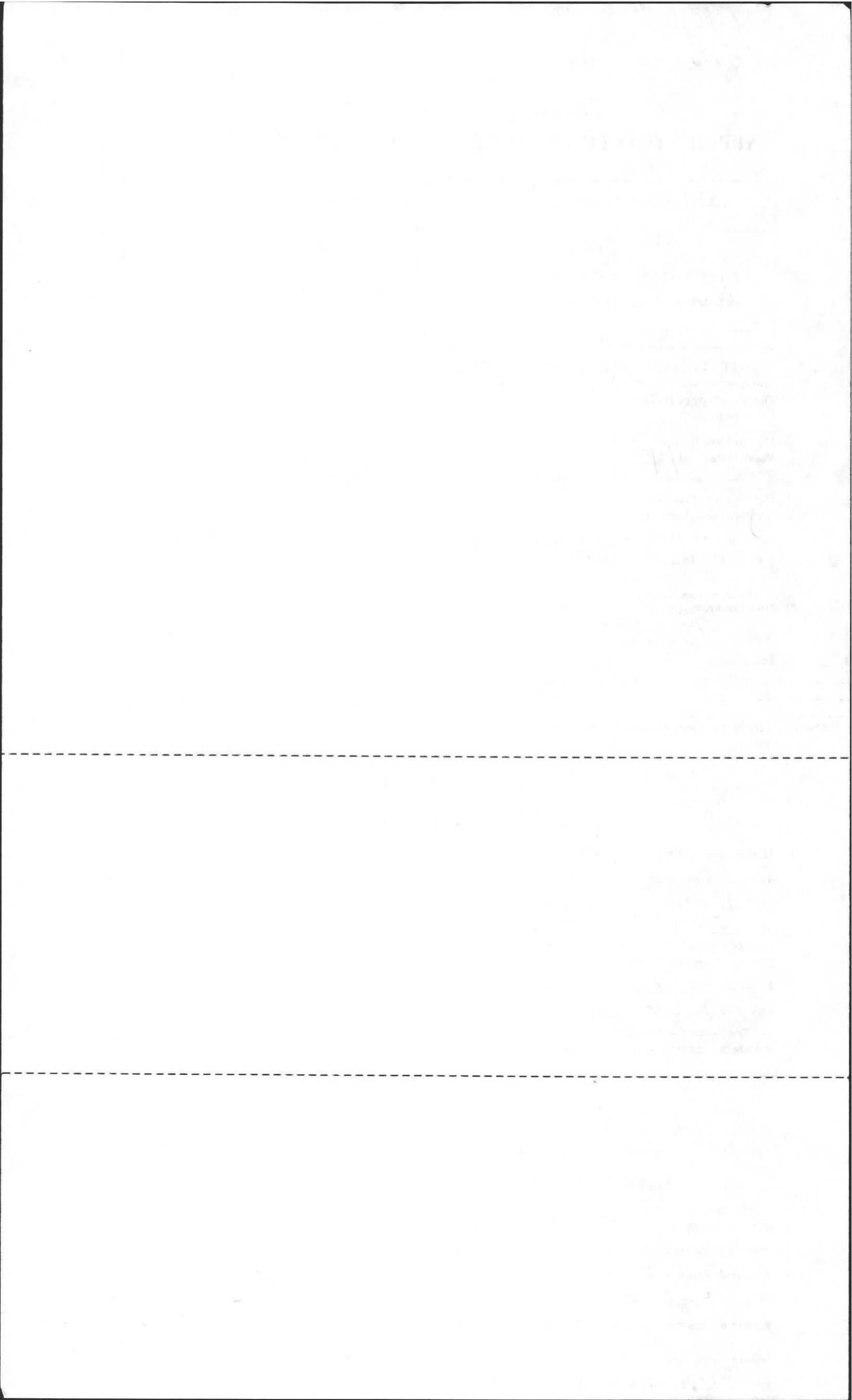
Permission is hereby granted to Construct ( ) Repair  Upgrade ( ) Abandon ( ) an individual sewage disposal system at 34 Overlook Drive as described in the application for Disposal System Construction Permit No. 01-02, dated Feb 01, 2001

Provided: Construction shall be completed within three years of the date of this permit. All local conditions must be met.

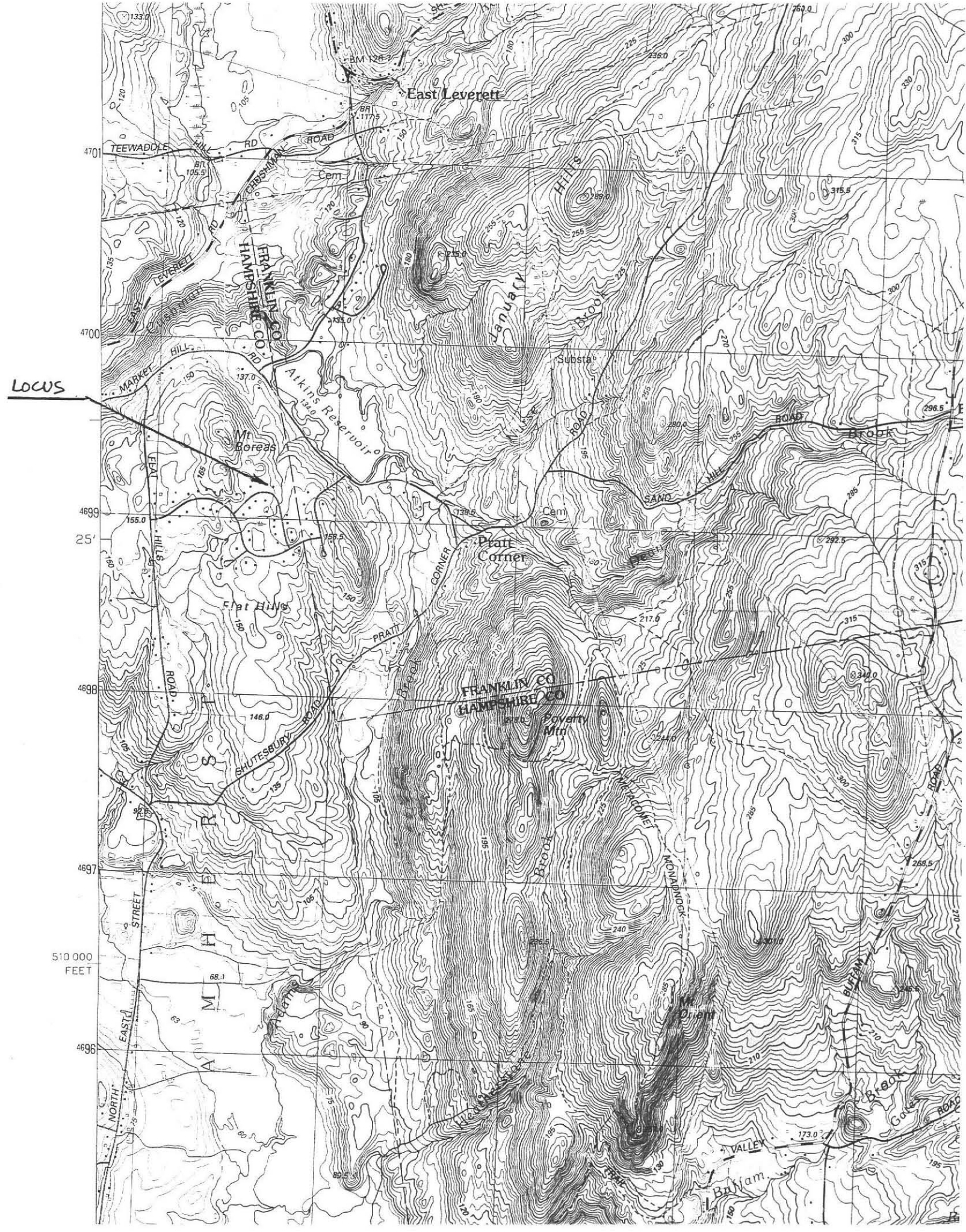
Date Feb 01, 2001 Board of Health [Signature]

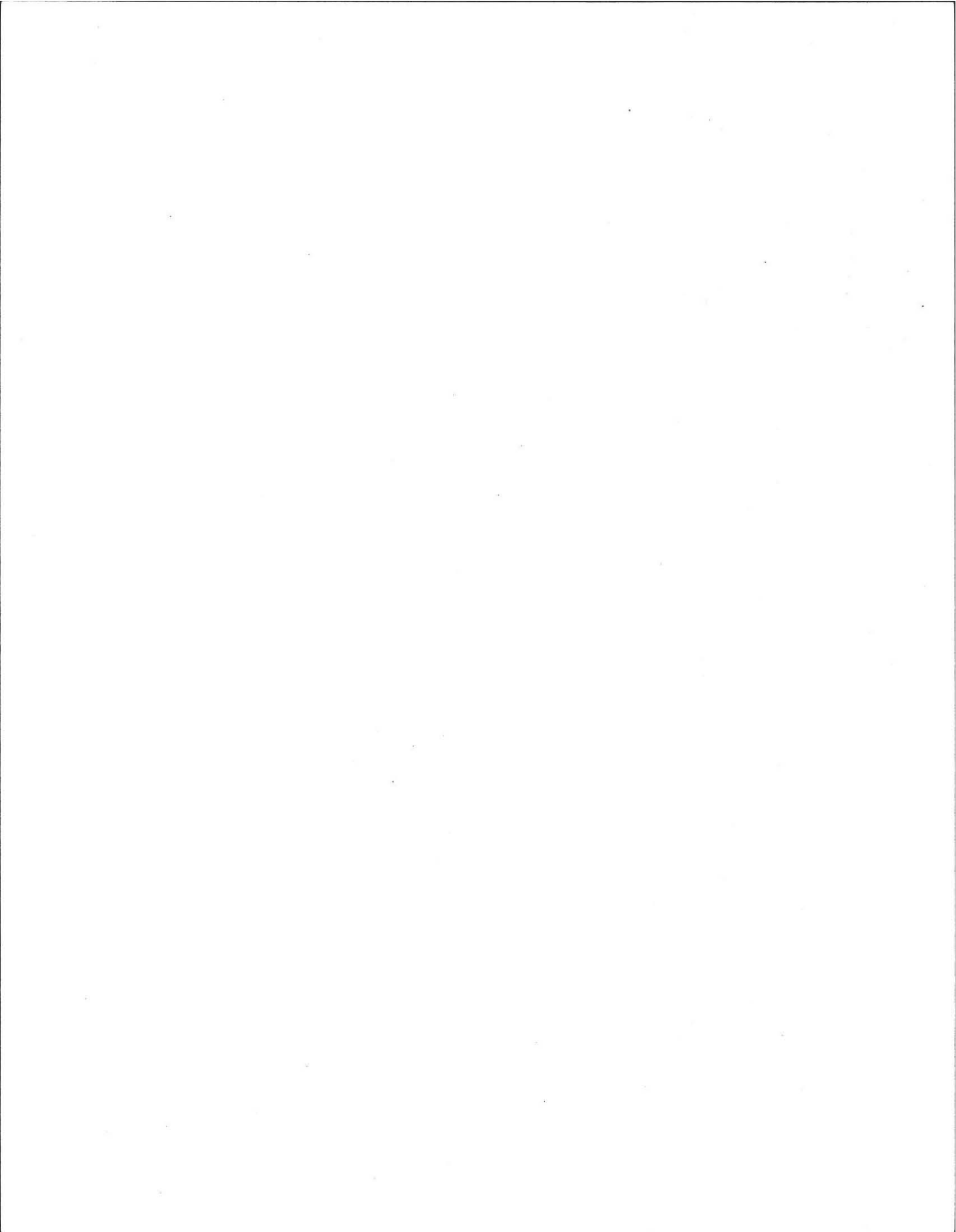
FORM 2 - DSCP DEP APPROVED FORM 5/96

VARIANCE GRANTED AT TUES JAN 30th meeting



LOCUS









**SANDRA COMBS MOULTON**  
 34 OVERLOOK DRIVE  
 AMHERST MA 01002  
 PH. 413-256-6731

439  
53-248/118

DATE January 8, 2001

PAY TO THE ORDER OF Town of Amherst \$ 25.00  
Twenty-five and 00/100 DOLLARS  Security features included. Details on back.

 THE BANK OF WESTERN MASSACHUSETTS  
 SPRINGFIELD, MASSACHUSETTS

FOR \_\_\_\_\_ Sandra Combs Moulton MP


⑆011802488⑆ 08 00214247⑈ 0439


© HARLAND

**SANDRA COMBS MOULTON**  
 34 OVERLOOK DRIVE  
 AMHERST MA 01002  
 PH. 413-256-6731

440  
53-248/118

DATE January 2, 2001

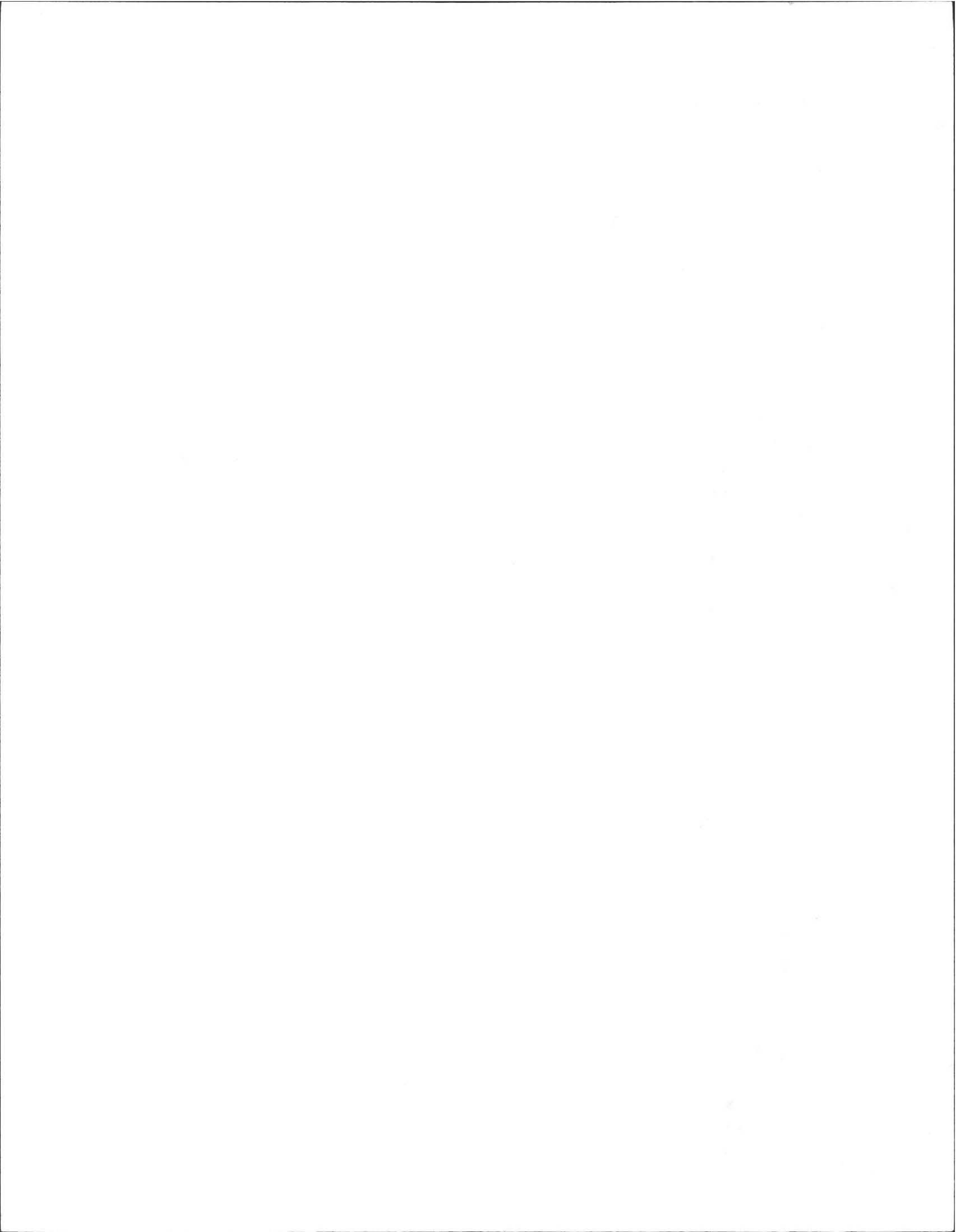
PAY TO THE ORDER OF Daily Hampshire Youth \$ 17.00  
Seventeen and 00/100 DOLLARS  Security features included. Details on back.

 THE BANK OF WESTERN MASSACHUSETTS  
 SPRINGFIELD, MASSACHUSETTS

FOR \_\_\_\_\_ Sandra Combs Moulton MP

⑆011802488⑆ 08 00214247⑈ 0440

© HARLAND





# WPA Form 1 - Request for Determination of Applicability

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

Please type or print clearly all information requested on this form.

## A General Information

1. Applicant:

Sandra C. Moulton + David Moulton

Name

34 OVERLOOK Drive

Mailing Address

AMHERST

City/Town

MA 01002

State

Zip Code

413 256 6731

Phone Number

Fax Number (if applicable)

E-Mail Address (if applicable)

2. Representative (if any):

Firm

Contact Name

Mailing Address

City/Town

State

Zip Code

Phone Number

Fax Number (if applicable)

E-mail Address (if applicable)

## B Determinations

1. As the applicant, I, request that the

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) indicated and depicted on plan(s) and/or map(s) referenced below are accurately delineated.

C. whether the work described and/or depicted on plan referenced below is subject to the Wetlands Protection Act.

D. whether the area and/or work described and/or depicted on plan referenced below is subject to the jurisdiction of any municipal wetlands protection law or bylaw of

Name of Municipality

E. the scope of alternatives to be considered for work (described below) that is located in the Riverfront Area.

## C Project Description

1. The project location is described as follows. (Use map(s) and/or plan(s) to identify the location of the area subject to this request.)

a. Location:

34 OVERLOOK Drive

Street Address

AMHERST MA 01002

City/Town

6B

Assessors Map/Plat #

48

Parcel/Lot #

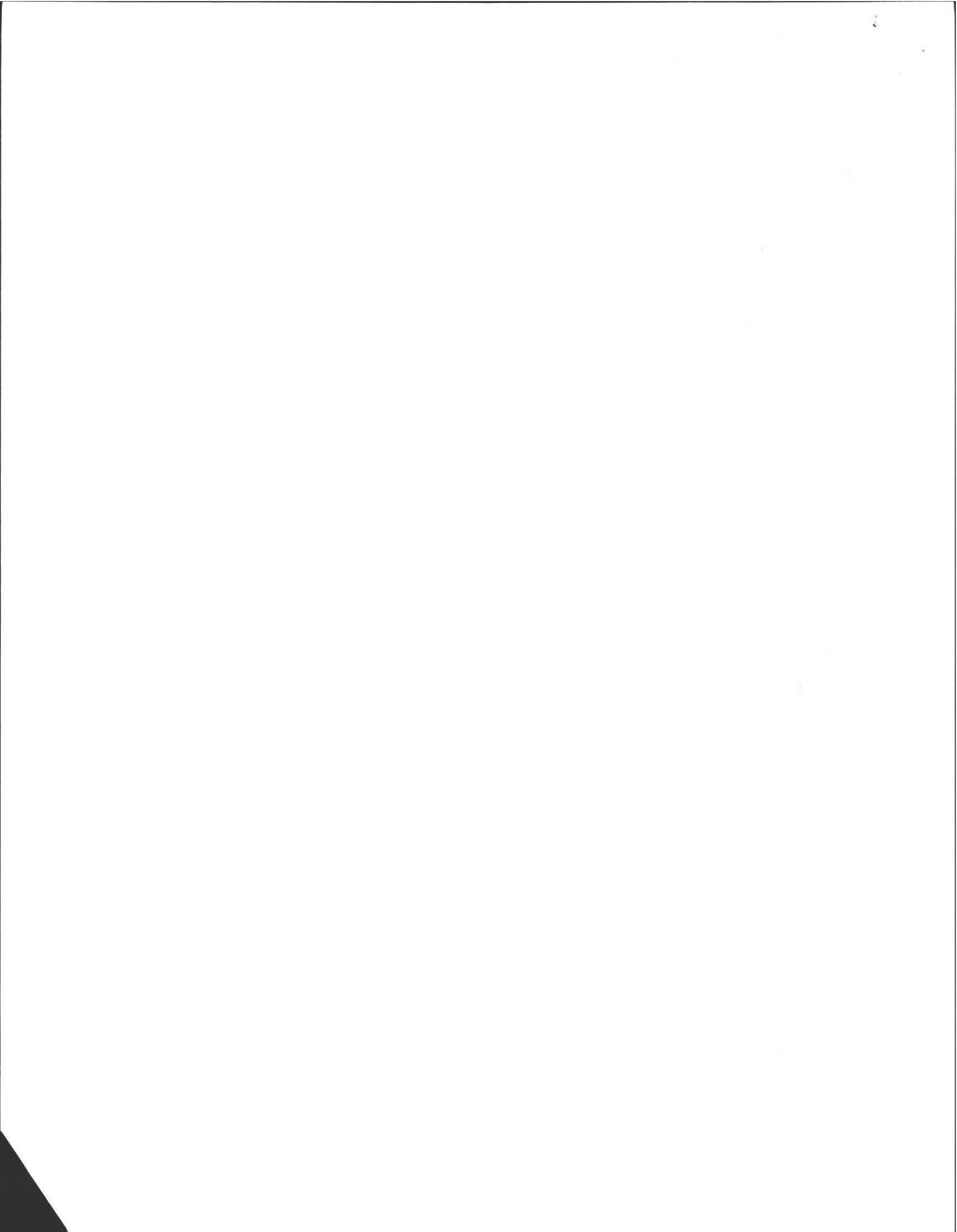
b. Area Description (use additional paper if necessary):

Replace Leach Field  
Field to be 50 FT<sup>2</sup>  
from wetlands and 102 FT<sup>2</sup>  
from ditch and 131 FT from brook

c. Plan and/or map reference(s) (list title and date):

Sewage System Repair Plan  
1/2/01







# WPA Form 1 - Request for Determination of Applicability

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

## **C** Project Description (cont.)

2. The proposed work is described below. (If needed, provide plan(s) of work.)

a. Work Description (use additional paper, if necessary).

See Repair Plan  
(Attached)

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b. Exemptions. 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).

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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 lot recorded after 8/1/96
- Project, other than a single family home 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 projects
- 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.

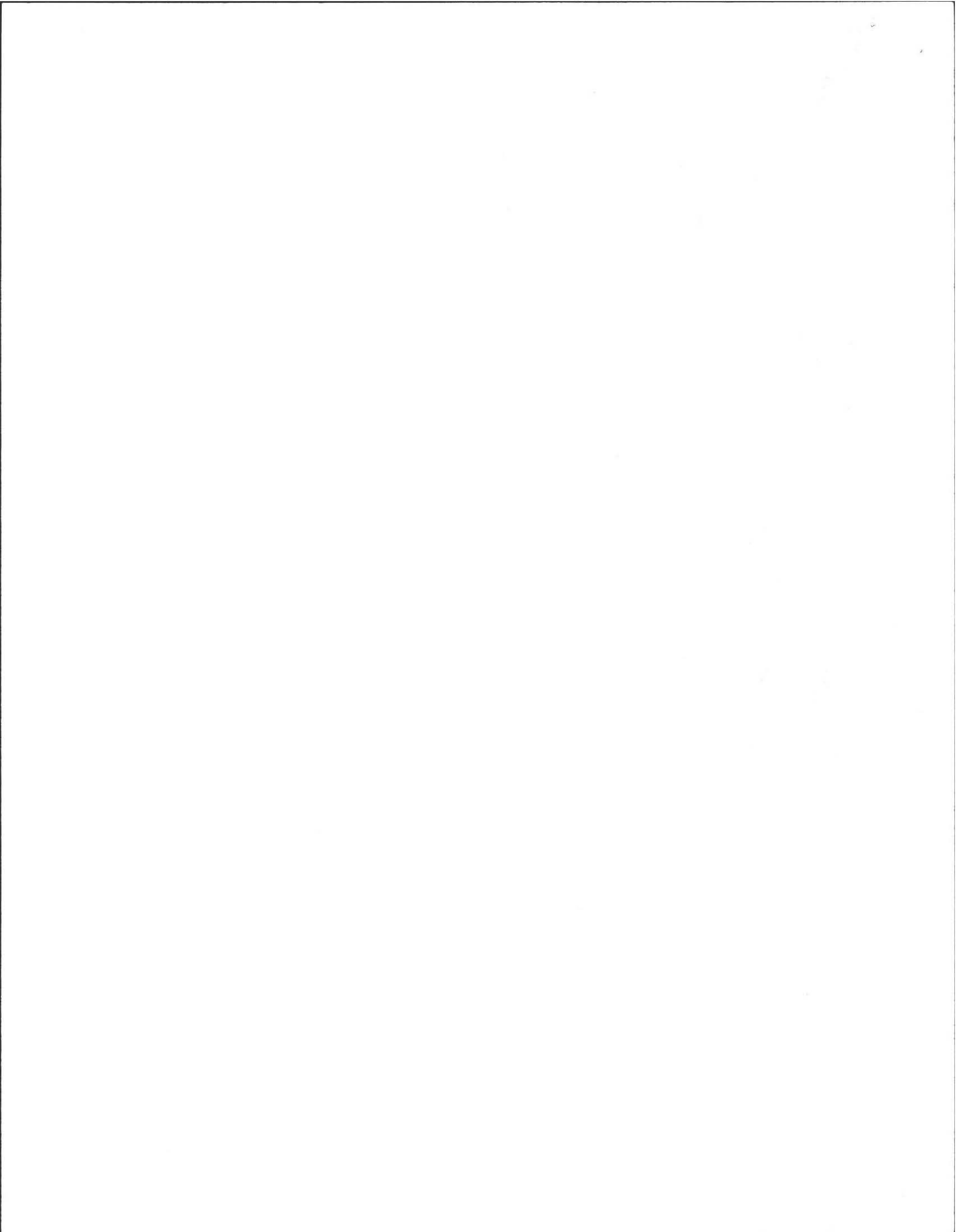
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# WPA Form 1 - Request for Determination of Applicability

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

## 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 Department of Environmental Protection 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.

Signatures:

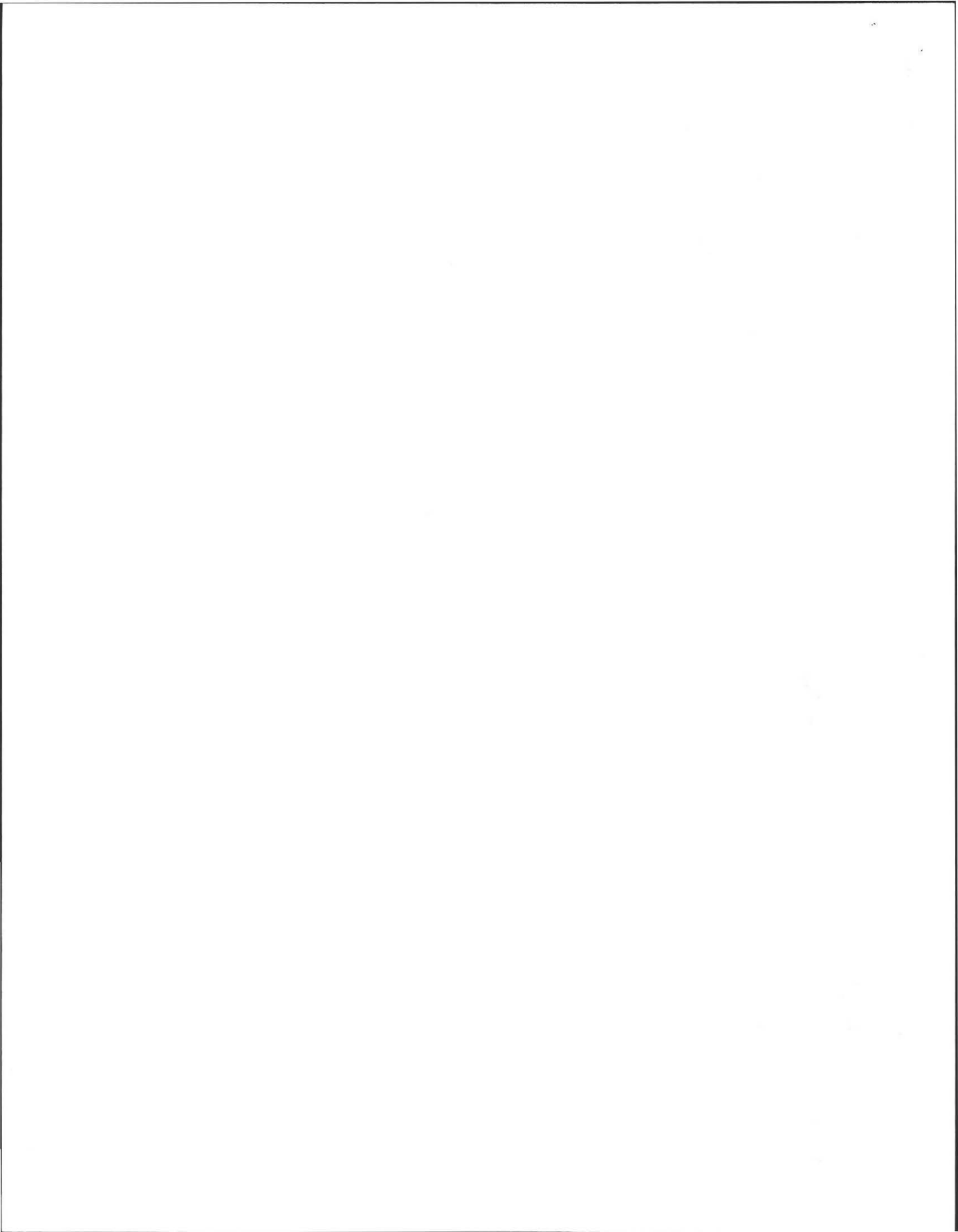
I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

  
Signature of Applicant 1/8/01  
Date

SANDRA C & DANIEL MOULTON  
Print Name

The name and address of the property owner:

SANDRA C & DANIEL MOULTON  
Name  
34 OVERLOOK DRIVE  
Mailing Address  
HAVERST  
City/Town  
MA 01002  
State Zip Code



## WPA Form 1 - Request for Determination of Applicability

Massachusetts Wetlands Protection Act (M.G.L. Chapter 131, Section 40)

### Resource Areas: Boundaries.

For boundaries of inland resource areas (including the Riverfront Area, which may be either inland or coastal), refer to subsection (2), "Definitions, Critical Characteristics and Boundaries," for each resource area covered under 310 CMR 10.54 - 10.58.

For boundaries of coastal resource areas, refer to the definitions in 310 CMR 10.04 and 10.24 for each resource area covered under 310 CMR 10.25 - 10.35, as well as in the text of Sections 10.25 - 10.35.

The boundary of the Buffer Zone is determined by measuring 100 feet horizontally from those areas specified in 310 CMR 10.02(1)(a).

*Box A.* Describe the site and, if possible, the boundary of any area that may be subject to protection under the Act (including the Buffer Zone).

*Box B.* As noted earlier, Box B should only be checked with approval of the conservation commission. If checked, submit:

- plans identifying the precise boundaries of the resource area(s) delineated;
- method used to determine the boundaries of Bordering Vegetated Wetland. Note whether the boundary was delineated based on the presence of one or more of the following:
  - \* 50% or more wetland indicator plants
  - \* Saturated/inundated conditions
  - \* Groundwater Indicators
  - \* Direct Observation
  - \* Hydric soil indicators
  - \* For disturbed sites: specific, credible evidence of conditions prior to disturbance

Use one of the methods indicated above to determine the boundaries of Bordering Vegetated Wetlands (BVW). On the form, check all the methods that are used to determine the boundary. These methods are discussed in the wetlands regulations at 310 CMR 10.55(2)(c). When undertaking BVW delineations, whether by vegetation alone or by vegetation and other indicators of wetland hydrology, applicants are encouraged to use the Department's BVW Handbook: *Delineating Bordering Vegetated Wetlands Under the Massachusetts Wetlands Protection Act* (1995). This document is available for purchase from the State House Bookstore (617/727-2834) and State House Bookstore West (413/784-1378). The Department encourages applicants to

complete the BVW Field Data Form contained in the handbook and submit it with the Request for Determination of Applicability. If detailed vegetative assessments are not required for a particular site, the reasons should be noted on the Field Data Form.

*Box C.* Describe the boundaries of all resource areas and Buffer Zones where work will occur or which could be impacted by the work.

*Box D.* Describe the site and, if possible, the boundary of any area that may be subject to a municipal wetlands law or bylaw. If there may be areas on the site which are not subject to the Wetlands Protection Act, but which may be subject to a municipal law or bylaw (if any), specifically note the boundaries of such areas. Describe all areas where work is planned if such work may be subject to municipal wetlands law or bylaw.

*Box E.* Indicate the precise location of all work relative to the boundaries of the Riverfront Area.

**Section C: Project Description.** In this section, the applicant must describe the area and proposed work (if any) subject to the Request. The type of information required depends, in part, on the type of determination requested in Section B. In all cases, the applicant should describe the site based on resource area jurisdiction and boundaries under the Wetlands Protection Act and regulations.

1a. Location. Include a street address (if one exists) and, if known, the Assessors map or plat number, the parcel number, and the lot number. The map or plat, parcel, and lot numbers must be included if the lot subject to the Request does not contain a residence, school, or commercial or industrial establishment, or if the lot is being subdivided.

1b. Area Description. The area should be described in narrative form. If needed, attach additional sheets for a more complete description of the area; a map or plan may also be used as part of the area description (see instructions for 1c for plan and map requirements).

1c. Plan and/or map reference(s). On the application form, list the titles of all attached plans and maps, as well as the most recent revision date.

Submit an 8 1/2" x 11" section of the U.S. Geologic Survey (USGS) quadrangle 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.

## WPA Form 1 - Request for Determination of Applicability

Massachusetts Wetlands Protection Act (M.G.L. Chapter 131, Section 40)

# Instructions for Completing Application WPA Form 1 - Request for Determination of Applicability

*Please read these instructions before completing the Request for Determination of Applicability (WPA Form 1) for more information on certain items that are not self-explanatory.*

### Introduction

The Request for Determination of Applicability is a process which provides applicants with the *option* of seeking a determination on the applicability of the Wetlands Protection Act (the Act) to a proposed site or activity. Before filing this form to confirm the boundary delineation of a Bordering Vegetated Wetland (BVW), the applicant should discuss other delineation review options with the conservation commission. The commission may require the submission of WPA Form 4A (Abbreviated Notice of Resource Area Delineation), WPA Form 3 (Notice of Intent), or WPA Form 4 (Abbreviated Notice of Intent).

The issuing authority (the conservation commission or the Department) is a reviewing agency. It is the applicant's responsibility to provide the information required for the review of this application. The submittal of a complete and accurate description of the site and project will minimize requests for additional information by the conservation commission or the Department which may result in an unnecessary delay in the issuance of a Determination of Applicability.

The issuing authority also may require that supporting materials (plans and calculations) be prepared by professionals including, but not limited to, a registered engineer, registered architect, registered landscape architect, registered land surveyor, registered sanitarian biologist, environmental scientist, geologist, or hydrologist, when, in its judgment, the complexity of the proposed work warrants the relevant specialized expertise.

To complete this form, the applicant should refer to the wetlands regulations (310 CMR 10.00). The regulations can be obtained from the Department's web site at [www.state.ma.us/dep](http://www.state.ma.us/dep). Regulations are available for viewing at public libraries and county law libraries across the state, as well as at the Department's Regional Service Centers (see Appendix A for

locations). Regulations also are available for sale from the State House Bookstore (617/727-2834) and State House Bookstore West (413/784-1378).

### Completing WPA Form 1

**Section B: Determinations.** The Request for Determination of Applicability can be used for a variety of purposes. Check one or more of the boxes under the following circumstances:

*Box A.* To determine whether the Act applies to a particular area of land. Areas subject to jurisdiction are described in the wetlands regulations at 310 CMR 10.02.

*Box B.* To confirm the precise boundaries of any delineated wetland resource area. NOTE: before checking Box B, consult the conservation commission to determine whether it will provide confirmation of wetland resource area boundaries in response to the filing of WPA Form 1. If the request is filed for a determination of BVW boundary, the commission may require applicants to file WPA Form 4A (Abbreviated Notice of Resource Area Delineation), WPA Form 3 (Notice of Intent), or WPA Form 4 (Abbreviated Notice of Intent) to obtain confirmation.

*Box C.* To determine whether the Act applies to work which is planned within a wetland resource area or within the Buffer Zone to a resource area. Work subject to jurisdiction is described in the wetlands regulations at 310 CMR 10.02.

*Box D.* To determine whether the city or town has a local wetlands law or bylaw which applies to any particular area of land and/or to work which is planned within this area of land.

*Box E.* To determine the scope of alternatives to be considered for work in the Riverfront Area. The scope of alternatives which must be considered for various types of projects in the Riverfront Area is contained in the wetland regulations at 310 CMR 10.58(4)(c)2.

*In order for the reviewing agency to obtain a complete description of the project site, resource area boundaries must be clearly delineated. Further explanation of Boxes A - E follows.*