

Massachusetts Department of Environmental Protection Bureau of Resource Protection - Wetlands

WPA Form 1- Request for Determination of Applicability

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. General Information		
1. Applicant:		
Nancy D'Loughlin Name	E-Mail Address	Shoghin C Umassud
260 Forest st		
Mailing Address So. Weymouth	MA	02190
City/Town	State	Zip Code
617-645-8699		F
Phone Number	Fax Number (if a	ipplicable)
2. Representative (if any):		
Growing FAMILIES Building Homes	LLC	
MARCUS Miraldi	Marcus C Grou	ing Families building homes
Contact Name	E-Mail Address	1
14 Nelson ST.		
Mailing Address		
Quincy	MA	02169
617-862-8126	State	Zip Code

Phone Number

Fax Number (if applicable)

B. Determinations

- 1. I request 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) 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:

WO	imourd
Name d	f 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):

260 Forest ST	Weiman Ma
Street Address	City/Town
44 BLOCK SOY PORCEL	14
Assessors Map/Plat Number	Parcel/Lot Number

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

existing	SCM,	inground	pool	w	surrounding	partio	
Within	Lawn	FOOTP	n.n.T		,		

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

Record of Survey/plan of la	nd 9/14/22
Title Leo Forcet ST RDA withand Resource A Title	Date
Title	Date

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

Replacing exiting semi inground Line pool with new Masonary pool up matching size.



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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:

Nancy O'Laughinn Name	
260 Forent St Mailing Address	
SD. Weymowth City/Town	
MA State	02190
Slate	Zip Code

Signatures:

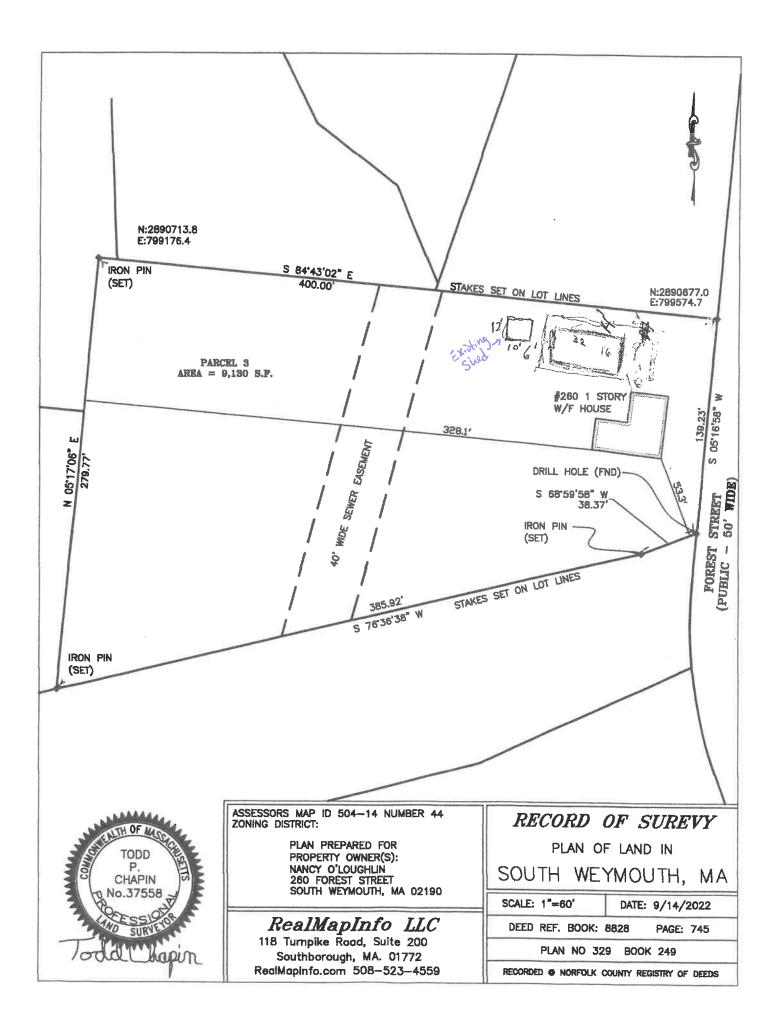
I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

Signature of Applicant

3/6/23 Date

Signature of Representative (if any)

Date

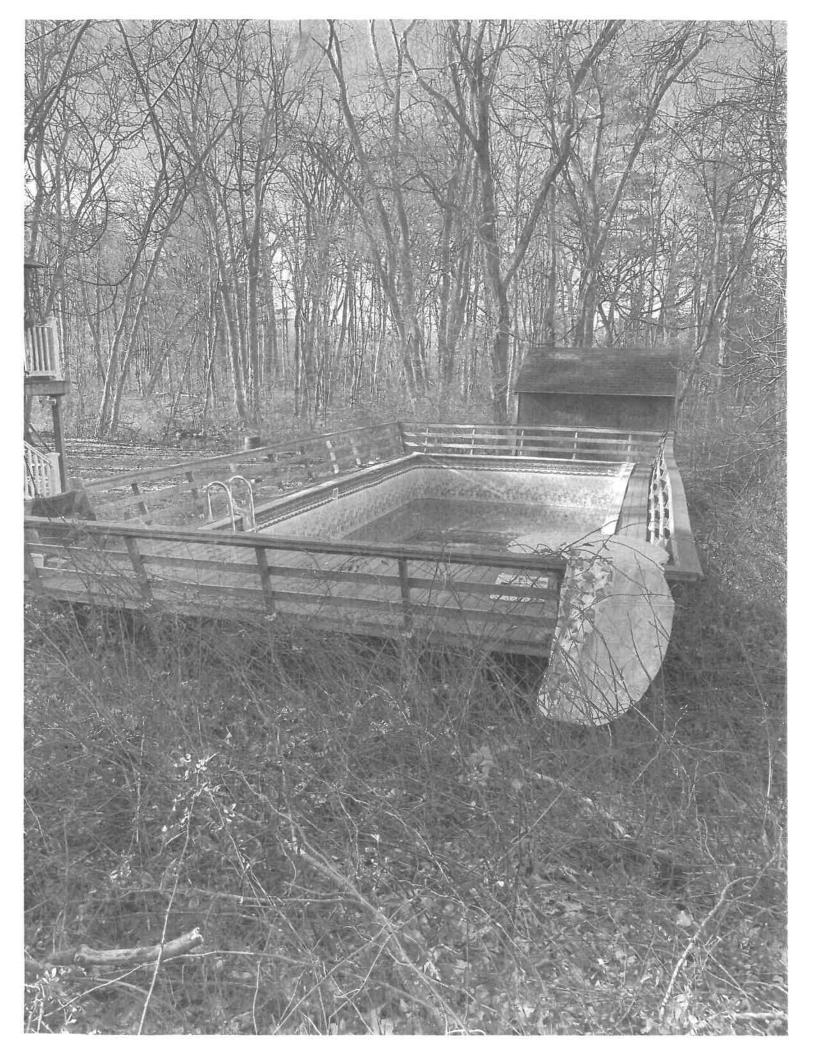




3/3/2023



lisher. While conducting a site visit, Andrew Hultin, Conservation Administrator, measured a ~30ft distance from limit of work (highlighted red) to the Bor-This map was created by Mike Perrin, Assistant Conservation Administrator, on 3/3/2023 using MassGIS DEP Wetlands data, field data, and Microsoft Pubdering Vegetated Wetland/Wooded Swamp.



SITE ACCESS AUTHORIZATION

DATE: MARCH 6, 2023
PROJECT: 260 Forent ST - POOL RDA
TO: Weymouth Conservation Commission and Conservation Administrator
FROM: Nancy O'Losghin
LOCATION: 260 FORT ST (Hereafter referred to as the property)

I (We) hereby authorize the individual members of the Conservation Commission and its agents to enter upon the property for the purpose of gathering information prior to issuing a Determination of Applicability or an Order of Conditions and for the purpose of enforcing the Order of Conditions prior to the issuance of a Certificate of Compliance.

TIME: FROM THE PRESENT TO DATE OF ISSUANCE OF CERTIFICATE OF COMPLIANCE

_____DATE: _____3/6/23 **PROPERTY OWNER:**