

WPA Form 3 - Notice of Intent

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

Provided by MassDEP: MassDEP File Number Document Transaction Number Charlton

City/Town

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





Note: Before completing this form consult your local Conservation Commission regarding any municipal bylaw or ordinance.

0 North Sturbridge Road	Charlton	01507
a. Street Address	b. City/Town	c. Zip Code
	42.173307	-72.021431
Latitude and Longitude:	d. Latitude	e. Longitude
14	7 and 11.1	
f. Assessors Map/Plat Number	g. Parcel /Lot	t Number
Applicant:		
Marsel	Kambei	raj
a. First Name	b. Last Na	ame
Sunpin Solar Development, I	LLC	
c. Organization		
3 Corporate Park, Suite 168		
d. Street Address		
Irvine	CA	92606
e. City/Town	f. State	g. Zip Code
201-774-7996	mkamberaj@s	unpinsolar.us
h. Phone Number i. Fax	Number j. Email Address	
Property owner (required if d Pamela a. First Name	ifferent from applicant):	
Pamela a. First Name	Blackad	dar
Pamela a. First Name c. Organization	Blackac b. Last Na	dar
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit A	Blackac b. Last Na	dar
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address	Blackac b. Last Na	dar ame
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet	Blackac b. Last Na	dar ame
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town	Blackad b. Last Na b.	dar
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904	Blackac b. Last Na	dar
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904	Blackad b. Last Na FL f. State PBlackadar@d	dar
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number i. Fax	Blackad b. Last Na FL f. State PBlackadar@d	dar
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any):	Blackad b. Last Na FL f. State PBlackadar@c Number j. Email address	dar ame 32127 g. Zip Code
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any): Danny	Blackad b. Last Na FL f. State PBlackadar@c pBlackadar@c j. Email address Rebelo	dar ame 32127 g. Zip Code
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any): Danny a. First Name BETA Group, Inc. c. Company	Blackad b. Last Na FL f. State PBlackadar@c pBlackadar@c j. Email address Rebelo	dar ame 32127 g. Zip Code
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any): Danny a. First Name BETA Group, Inc. c. Company 1 Springfield Street	Blackad b. Last Na FL f. State PBlackadar@c pBlackadar@c j. Email address Rebelo	dar ame 32127 g. Zip Code
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any): Danny a. First Name BETA Group, Inc. c. Company 1 Springfield Street d. Street Address	FL f. State PBlackadar@c j. Email address Rebelo b. Last Na	dar ame 32127 g. Zip Code ame
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number i. Fax Representative (if any): Danny a. First Name BETA Group, Inc. c. Company 1 Springfield Street d. Street Address Chicopee	Blackad b. Last Na FL f. State PBlackadar@c j. Email address Rebelo b. Last Na MA	32127 g. Zip Code ame
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any): Danny a. First Name BETA Group, Inc. c. Company 1 Springfield Street d. Street Address Chicopee e. City/Town	FL f. State PBlackadar@c j. Email address Rebelo b. Last Na And	32127 g. Zip Code
Pamela a. First Name c. Organization 4421 S. Atlantic Ave, Unit Add. Street Address Ponce Inlet e. City/Town 386-383-5904 h. Phone Number Representative (if any): Danny a. First Name BETA Group, Inc. c. Company 1 Springfield Street d. Street Address Chicopee e. City/Town 413-331-5326	Blackad b. Last Na FL f. State PBlackadar@c j. Email address Rebelo b. Last Na MA	32127 g. Zip Code



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Provided by MassDEP:			
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Α.	General Information (continued)				
6. General Project Description:					
	Clearing of vegetation and installation of Large-scal 10.9-acres of an approximately 31.364-acres proper				
7a.	7a. Project Type Checklist: (Limited Project Types see Section A. 7b.)				
	1. Single Family Home	2. Residential Subdivision			
	3. Commercial/Industrial	4. Dock/Pier			
	5. 🛛 Utilities	6. Coastal engineering Structure			
	7. Agriculture (e.g., cranberries, forestry)	8. Transportation			
	9. Other				
7b.	Is any portion of the proposed activity eligible to be Restoration Limited Project) subject to 310 CMR 10				
	If yes, describe which limite	ed project applies to this project. (See 310 CMR plete list and description of limited project types)			
	2. Limited Project Type	2. Limited Project Type			
		f the proposed activity is eligible to be treated as an Ecological Restoration Limited Project (310 CMR10.24(8), 310 CMR 10.53(4)), complete and attach Appendix A: Ecological Restoration Limited Project Checklist and Signed Certification.			
8.	Property recorded at the Registry of Deeds for:				
	Worcester				
	a. County 49768 & 49768	b. Certificate # (if registered land)			
	c. Book	246 and 249 d. Page Number			
B.	Buffer Zone & Resource Area Impa	acts (temporary & permanent)			
1.	Buffer Zone Only − Check if the project is located only in the Buffer Zone of a Bordering				
Vegetated Wetland, Inland Bank, or Coastal Resource Area.					
2.	Inland Resource Areas (see 310 CMR 10.54-10.58; if not applicable, go to Section B.3, Coastal Resource Areas).				
	Check all that apply below. Attach narrative and any project will meet all performance standards for each standards requiring consideration of alternative proj	of the resource areas altered, including			

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For all projects affecting other Resource Areas, please attach a narrative explaining how the resource area was delineated.

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B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

Resource Area		ce Area	Size of Proposed Alteration Proposed Replacement	
	a. Bank		1. linear feet	2. linear feet
	b	Bordering Vegetated Wetland	1. square feet	2. square feet
	c. Land Under Waterbodies and		1. square feet	2. square feet
		Waterways	3. cubic yards dredged	
	Resour	ce Area	Size of Proposed Alteration	Proposed Replacement (if any)
	d. 🗌	Bordering Land Subject to Flooding	1. square feet	2. square feet
			3. cubic feet of flood storage lost	4. cubic feet replaced
	e. 🗌	Isolated Land Subject to Flooding	1. square feet	
			2. cubic feet of flood storage lost	3. cubic feet replaced
	f. 🗌	Riverfront Area	Name of Waterway (if available) - spec	ify coastal or inland
	 Width of Riverfront Area (che 		check one):	
			ensely Developed Areas only	
			ıral projects only	
			ects	
	a -	Fotal area of Piverfront Area	a on the site of the proposed project	·
3. Total area of Riverfront Area on the site of the propose			,	square feet
4. Proposed alteration of the Riverfront Area:				
	a. to	otal square feet	b. square feet within 100 ft.	c. square feet between 100 ft. and 200 ft.
5. Has an alternatives analysis been done and is it attached to this NOI?			s NOI? Yes No	
	6. \	Was the lot where the activi	ty is proposed created prior to Augu	ust 1, 1996? ☐ Yes ☐ No
3.	. ☐ Coastal Resource Areas: (See 310 CMR 10.25-10.35)			

Note: for coastal riverfront areas, please complete Section B.2.f. above.



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B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

Check all that apply below. Attach narrative and supporting documentation describing how the project will meet all performance standards for each of the resource areas altered, including standards requiring consideration of alternative project design or location.

4.

5.

Resource Area		Size of Proposed	I Alteration	Proposed Replacement (if any)
а. 🗌	Designated Port Areas	Indicate size under Land Under the Ocean, below		
b. 🗌	Land Under the Ocean	1. square feet		
		2. cubic yards dredge	ed	
с. 🗌	Barrier Beach	Indicate size und	er Coastal Bea	ches and/or Coastal Dunes below
d. 🗌	Coastal Beaches	1. square feet		2. cubic yards beach nourishment
е. 🗌	Coastal Dunes	1. square feet		2. cubic yards dune nourishment
		Size of Proposed	I Alteration	Proposed Replacement (if any)
f g	Coastal Banks Rocky Intertidal	1. linear feet		
у. <u> </u>	Shores	1. square feet		
h. 🗌	Salt Marshes	1. square feet		2. sq ft restoration, rehab., creation
i. 🗌	Land Under Salt Ponds	1. square feet		
		2. cubic yards dredge	ed	
j. 🗌	Land Containing Shellfish	1. square feet		
k. 🗌	Fish Runs			ks, inland Bank, Land Under the er Waterbodies and Waterways,
		1. cubic yards dredge	ed	
ı. 🗌	Land Subject to Coastal Storm Flowage	1. square feet		
Restoration/Enhancement If the project is for the purpose of restoring or enhancing a wetland resource area in addition to the square footage that has been entered in Section B.2.b or B.3.h above, please enter the additional amount here.				
a. square feet of BVW			b. square feet of S	Salt Marsh
☐ Pr	☐ Project Involves Stream Crossings			
a. number of new stream crossings			b. number of repla	acement stream crossings

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		1 404 040	Document Transaction Number	
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C.	Other Applicable Standards and F	Requirements		
	This is a proposal for an Ecological Restoration complete Appendix A: Ecological Restoration (310 CMR 10.11).			
Str	eamlined Massachusetts Endangered Spec	ies Act/Wetlands I	Protection Act Review	
1.	Is any portion of the proposed project located in Esthe most recent Estimated Habitat Map of State-Li Natural Heritage and Endangered Species Program Massachusetts Natural Heritage Atlas or go to http://maps.massgis.state.ma.us/PRI_EST_HAB/v	sted Rare Wetland W m (NHESP)? To view	ildlife published by the	
	a. Yes No If yes, include proof of n	nailing or hand deliv	ery of NOI to:	
	Natural Heritage and E Division of Fisheries a 1 Rabbit Hill Road Westborough, MA 015	nd Wildlife	ogram	
	If yes, the project is also subject to Massachusetts CMR 10.18). To qualify for a streamlined, 30-day, complete Section C.1.c, and include requested macomplete Section C.2.f, if applicable. If MESA supply completing Section 1 of this form, the NHESP was up to 90 days to review (unless noted exceptions in	MESA/Wetlands Protouterials with this Notice of the Medical Information will require a separate	ection Act review, please e of Intent (NOI); OR is not included with the NOI, MESA filing which may take	
	c. Submit Supplemental Information for Endangere	ed Species Review*		
	1. Percentage/acreage of property to be a	altered:		
	(a) within wetland Resource Area	percentage/acreage		
	(b) outside Resource Area	percentage/acreage		
	2. Assessor's Map or right-of-way plan of	site		
2.	Project plans for entire project site, including wetland resource areas and areas outside of wetlands jurisdiction, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work **			
	(a) Project description (including description of impacts outside of wetland resource area & buffer zone)			

Photographs representative of the site

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^{*} Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review (see http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/). Priority Habitat includes habitat for state-listed plants and strictly upland species not protected by the Wetlands Protection Act.

^{**} MESA projects may not be segmented (321 CMR 10.16). The applicant must disclose full development plans even if such plans are not required as part of the Notice of Intent process.



3.

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C. Other Applicable Standards and Requirements (cont'd)

Make	(c) MESA filing fee (fee information available at http://www.mass.gov/dfwele/dfw/nhesp/regulatory review/mesa/mesa fee schedule.htm). Make check payable to "Commonwealth of Massachusetts - NHESP" and <i>mail to NHESP</i> at above address				
Projec	Projects altering 10 or more acres of land, also submit:				
(d)	(d) Vegetation cover type map of site				
(e)	Project plans showing Priority & Estima	ated Habitat boundaries			
(f) O	R Check One of the Following				
1. 🗌	Project is exempt from MESA review. Attach applicant letter indicating which MESA exemption applies. (See 321 CMR 10.14 http://www.mass.gov/dfwele/dfw/nhesp/regulatory_review/mesa/mesa_exemptions.htm the NOI must still be sent to NHESP if the project is within estimated habitat pursuant to 310 CMR 10.37 and 10.59.)				
2. 🗌	Separate MESA review ongoing.	a. NHESP Tracking #	b. Date submitted to NHESP		
3.	Separate MESA review completed. Include copy of NHESP "no Take" dete Permit with approved plan.	ermination or valid Conser	vation & Management		
	For coastal projects only, is any portion of the proposed project located below the mean high water line or in a fish run?				
a. Not applicable – project is in inland resource area only b. Yes No					
If yes, include proof of mailing, hand delivery, or electronic delivery of NOI to either:					
South Shore - Cohasset to Rhode Island border, and the Cape & Islands: North Shore - Hull to New Hampshire border:					
Division of Marine Fisheries - Southeast Marine Fisheries Station Attn: Environmental Reviewer 836 South Rodney French Blvd. New Bedford, MA 02744 Email: Division of Marine Fisheries - North Shore Office Attn: Environmental Reviewer 30 Emerson Avenue Gloucester, MA 01930 Email: DMF.EnvReview-North@state.ma.us					

Also if yes, the project may require a Chapter 91 license. For coastal towns in the Northeast Region, please contact MassDEP's Boston Office. For coastal towns in the Southeast Region, please contact MassDEP's Southeast Regional Office.

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C. Other Applicable Standards and Requirements (cont'd)

	4.	Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?
Online Users: Include your document		a. Yes No If yes, provide name of ACEC (see instructions to WPA Form 3 or MassDEP Website for ACEC locations). Note: electronic filers click on Website.
transaction		b. ACEC
number (provided on your receipt page)	5.	Is any portion of the proposed project within an area designated as an Outstanding Resource Water (ORW) as designated in the Massachusetts Surface Water Quality Standards, 314 CMR 4.00?
with all supplementary information you		a. 🗌 Yes 🗵 No
submit to the Department.	6.	Is any portion of the site subject to a Wetlands Restriction Order under the Inland Wetlands Restriction Act (M.G.L. c. 131, § 40A) or the Coastal Wetlands Restriction Act (M.G.L. c. 130, § 105)?
		a. ☐ Yes ☒ No
	7.	Is this project subject to provisions of the MassDEP Stormwater Management Standards?
		a. Yes. Attach a copy of the Stormwater Report as required by the Stormwater Management Standards per 310 CMR 10.05(6)(k)-(q) and check if:
		Applying for Low Impact Development (LID) site design credits (as described in Stormwater Management Handbook Vol. 2, Chapter 3)
		2. A portion of the site constitutes redevelopment
		3. Proprietary BMPs are included in the Stormwater Management System.
		b. No. Check why the project is exempt:
		1. Single-family house
		2. Emergency road repair
		3. Small Residential Subdivision (less than or equal to 4 single-family houses or less than or equal to 4 units in multi-family housing project) with no discharge to Critical Areas.
	D.	Additional Information
		This is a proposal for an Ecological Restoration Limited Project. Skip Section D and complete Appendix A: Ecological Restoration Notice of Intent – Minimum Required Documents (310 CMR 10.12).
		Applicants must include the following with this Notice of Intent (NOI). See instructions for details.
		Online Users: Attach the document transaction number (provided on your receipt page) for any of the following information you submit to the Department.
		1. Substituting Sufficient information for the Conservation Commission and the Department to locate the site. (Electronic filers may omit this item.)
		2. Plans identifying the location of proposed activities (including activities proposed to serve as

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to the boundaries of each affected resource area.

a Bordering Vegetated Wetland [BVW] replication area or other mitigating measure) relative



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D.

D.	D. Additional Information (cont'd)					
	3. A Identify the method for BVW and other resource area boundary delineations (MassDEP Field Data Form(s), Determination of Applicability, Order of Resource Area Delineation, and attach documentation of the methodology.					
	4. 🛛	List the titles and dates for all plans and	other materials submitted wi	th this NOI.		
Figure 2 - Site Plan						
		lan Title				
		TA Group, Inc.	Danny P. Rebelo, PE			
		repared By	c. Signed and Stamped by			
		/2018	80			
	d. F	inal Revision Date	e. Scale			
	f. Ad	dditional Plan or Document Title		g. Date		
5. If there is more than one property owner, please attach a list of these property owner.				property owners not		
	6.	Attach proof of mailing for Natural Herita	ge and Endangered Species	Program, if needed.		
	7. Attach proof of mailing for Massachusetts Division of Marine Fisheries, if needed.					
8. Attach NOI Wetland Fee Transmittal Form						
9. Attach Stormwater Report, if needed.						
E.	Fees			_		
	 Fee Exempt: No filing fee shall be assessed for projects of any city, town, county, or district of the Commonwealth, federally recognized Indian tribe housing authority, municipal housin authority, or the Massachusetts Bay Transportation Authority. 					
	Applicants must submit the following information (in addition to pages 1 and 2 of the NOI Wetland Fee Transmittal Form) to confirm fee payment:					
	90631		7/23/2018			
		pal Check Number	3. Check date			
	90630		7/23/2018	7/23/2018		
		Check Number	5. Check date			
	BETA Group, Inc.					
6. Payor name on check: First Name 7. Payor name or				Last Name		

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F. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Notice of Intent and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge. I understand that the Conservation Commission will place notification of this Notice in a local newspaper at the expense of the applicant in accordance with the wetlands regulations, 310 CMR 10.05(5)(a).

I further certify under penalties of perjury that all abutters were notified of this application, pursuant to the requirements of M.G.L. c. 131, § 40. Notice must be made by Certificate of Mailing or in writing by hand delivery or certified mail (return receipt requested) to all abutters within 100 feet of the property line of the project location.

1. Signature of Applicant	2. Date
3. Signature of Property Owner (if different)	4. Date
5. Signature of Representative (if any)	6. Date

For Conservation Commission:

Two copies of the completed Notice of Intent (Form 3), including supporting plans and documents, two copies of the NOI Wetland Fee Transmittal Form, and the city/town fee payment, to the Conservation Commission by certified mail or hand delivery.

For MassDEP:

One copy of the completed Notice of Intent (Form 3), including supporting plans and documents, one copy of the NOI Wetland Fee Transmittal Form, and a **copy** of the state fee payment to the MassDEP Regional Office (see Instructions) by certified mail or hand delivery.

Other:

If the applicant has checked the "yes" box in any part of Section C, Item 3, above, refer to that section and the Instructions for additional submittal requirements.

The original and copies must be sent simultaneously. Failure by the applicant to send copies in a timely manner may result in dismissal of the Notice of Intent.

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NOI Wetland Fee Transmittal Form

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Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





A. Applicant Informat	ion				
Location of Project:	Location of Project:				
0 North Sturbridge Road		Charlton			
a. Street Address	-	b. City/Town			
90630, 90631		\$1,050			
c. Check number		d. Fee amount			
2. Applicant Mailing Address:					
Marsel		Kamberaj			
a. First Name		b. Last Name			
Sunpin Solar Development,	Sunpin Solar Development, LLC				
c. Organization					
3 Corporate Park, Suite 168	3 Corporate Park, Suite 168				
d. Mailing Address					
Irvine		CA	92606		
e. City/Town		f. State	g. Zip Code		
201-774-7996		mkamberaj@sunpinsolar.u	IS		
h. Phone Number i. F	ax Number	j. Email Address			
3. Property Owner (if different):	:				
Pamela		Blackadar			
a. First Name		b. Last Name			
c. Organization					
4421 S. Atlantic Ave, Unit A	1				
d. Mailing Address					
Ponce Inlet		<u>FL</u>	32127		
e. City/Town		f. State	g. Zip Code		
386-383-5904		PBlackadar@cfl.rr.com			
h. Phone Number i. F	ax Number	j. Email Address			

To calculate filing fees, refer to the category fee list and examples in the instructions for filling out WPA Form 3 (Notice of Intent).

B. Fees

Fee should be calculated using the following process & worksheet. *Please see Instructions before filling out worksheet.*

Step 1/Type of Activity: Describe each type of activity that will occur in wetland resource area and buffer zone.

Step 2/Number of Activities: Identify the number of each type of activity.

Step 3/Individual Activity Fee: Identify each activity fee from the six project categories listed in the instructions.

Step 4/Subtotal Activity Fee: Multiply the number of activities (identified in Step 2) times the fee per category (identified in Step 3) to reach a subtotal fee amount. Note: If any of these activities are in a Riverfront Area in addition to another Resource Area or the Buffer Zone, the fee per activity should be multiplied by 1.5 and then added to the subtotal amount.

Step 5/Total Project Fee: Determine the total project fee by adding the subtotal amounts from Step 4.

Step 6/Fee Payments: To calculate the state share of the fee, divide the total fee in half and subtract \$12.50. To calculate the city/town share of the fee, divide the total fee in half and add \$12.50.



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B. Fees (continued)			
Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
3c.) road construction not crossing or driveway	1	\$1,050	\$1,050
	-	otal Project Fee:	\$1,050.00
	Step 6	Fee Payments:	
	Total	Project Fee:	\$1,050.00 a. Total Fee from Step 5
	State share	of filing Fee:	\$512.50 b. 1/2 Total Fee less \$12.50
	City/Town share	e of filling Fee:	\$537.50 c. 1/2 Total Fee plus \$12.50

C. Submittal Requirements

a.) Complete pages 1 and 2 and send with a check or money order for the state share of the fee, payable to the Commonwealth of Massachusetts.

Department of Environmental Protection Box 4062 Boston, MA 02211

b.) **To the Conservation Commission:** Send the Notice of Intent or Abbreviated Notice of Intent; a **copy** of this form; and the city/town fee payment.

To MassDEP Regional Office (see Instructions): Send a copy of the Notice of Intent or Abbreviated Notice of Intent; a **copy** of this form; and a **copy** of the state fee payment. (E-filers of Notices of Intent may submit these electronically.)