

Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Wetlands

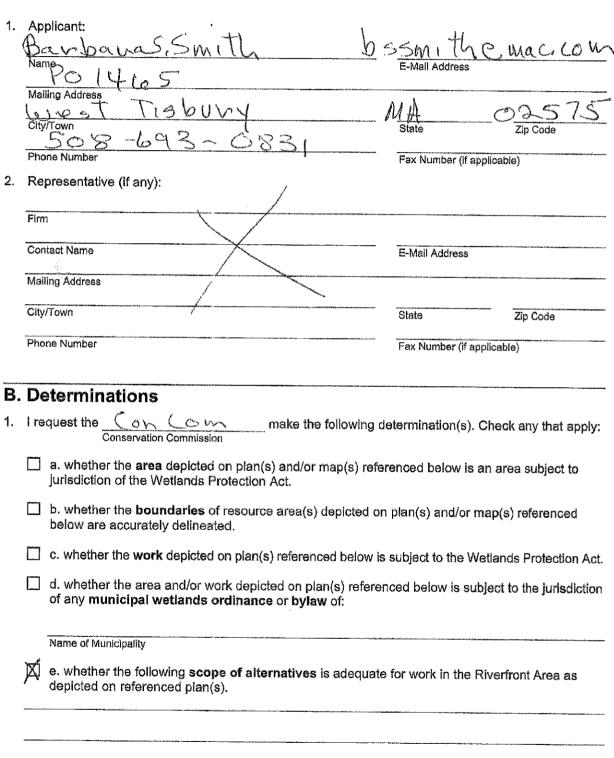
City/Town

WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40 AND THE WEST TISBURY WETLANDS PROTECTION BYLAW

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.





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AND THE WEST TISBURY WETLANDS PROTECTION BYLAW

C. Project Description

1.	a. Project Location (use maps and plans to identify the 13 Scotty's Lone. Street Address	\$ Sharen market	oject to this request):	
	Assessors Map/Plat Number	Parcel/Lot Number	**************************************	
	b. Area Description (use additional paper, if necessar 2 entrances to	y): Dond <	hare.	
Ü		Torrest -	· ·	
1	grow property: # 1	5/000	and the second s	
	bont aven and # ;	2 steps	tes	
	Swimming avea,	See attac	hed	
			Ĭ.	
	c. Plan and/or Map Reference(s):			
	Title	And the state of t	Date	
	Title		Date	
	Title		Date	
2.	a. Work Description (use additional paper and/or prov	vide plan(s) of work, if neo	cessary): ,	
Projects to improve evosion and access			accessiblity	
1- Replace * son treated lumber				
ties that were removed with untreate				
oak or locust. Fill space between with pepplesor weed block fabric and				
				wood chips,
	2 - Install wood s	teps, unto	eated lowber	
Ć	over existing stone	atare		
	unstable.	ETT/IITO OTTO MANAGEM HAPPEN HELL AND H		
see attached photos 12				



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Name and address of the property owner:

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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.

- Balance Smith				
Name PO 1465				
Malling Address West Tislovy	Aller Control of the			
City/Town A	02575			
State	Zip Code			
Signatures:				
l 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.				
Bala Smit	4/8/2021			
Signature of Applicant	Date '\			
Signature of Representative (if any)	Date			

