



Massachusetts Department of Environmental Protection

# eDEP Transaction Copy

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Username: **MIAMCDONALD33**

Transaction ID: **1304090**

Document: **WPA Form 3 - NOI**

Size of File: **249.45K**

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Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands  
WPA Form 3 - Notice of Intent  
Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

Provided by MassDEP:  
MassDEP File #:  
eDEP Transaction #:1304090  
City/Town:PAXTON

**A. General Information**

1. Project Location:

a. Street Address	12 NIPMUCK ROAD		
b. City/Town	PAXTON	c. Zip Code	01612
d. Latitude	42.29428N	e. Longitude	71.89546W
f. Map/Plat #	27	g. Parcel/Lot #	136

2. Applicant:

Individual  Organization

a. First Name	DANTE & PATRICIA	b. Last Name	ZAMARRO
c. Organization			
d. Mailing Address	12 NIPMUCK ROAD		
e. City/Town	PAXTON	f. State	MA
g. Zip Code	01612		
h. Phone Number	508-523-6135	i. Fax	
j. Email	dantezamarro@verizon.net		

3. Property Owner:

more than one owner

a. First Name	DANTE & PATRICIA	b. Last Name	ZAMARRO
c. Organization			
d. Mailing Address	12 NIPMUCK ROAD		
e. City/Town	PAXTON	f. State	MA
g. Zip Code	01612		
h. Phone Number	508-523-6135	i. Fax	
j. Email	dantezamarro@verizon.net		

4. Representative:

a. First Name	MIA	b. Last Name	MCDONALD
c. Organization			
d. Mailing Address	20 CIRCUIT AVE E		
e. City/Town	WORCESTER	f. State	MA
g. Zip Code	01603		
h. Phone Number	508-450-7268	i. Fax	
j. Email	mia.c.mcdonald@gmail.com		

5. Total WPA Fee Paid (Automatically inserted from NOI Wetland Fee Transmittal Form):

a. Total Fee Paid	110.00	b. State Fee Paid	42.50	c. City/Town Fee Paid	67.50
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6. General Project Description:

REPLACEMENT OF A SEPTIC SYSTEM FOR A SINGLE FAMILY HOME AND ASSOCIATED SITEWORK.

7a. Project Type:

- |   |  |
|---|--|
| 1. <input checked="" type="checkbox"/> Single Family Home     | 2. <input type="checkbox"/> Residential Subdivision                  |
| 3. <input type="checkbox"/> Limited Project Driveway Crossing | 4. <input type="checkbox"/> Commercial/Industrial                    |
| 5. <input type="checkbox"/> Dock/Pier                         | 6. <input type="checkbox"/> Utilities                                |
| 7. <input type="checkbox"/> Coastal Engineering Structure     | 8. <input type="checkbox"/> Agriculture (eg., cranberries, forestry) |
| 9. <input type="checkbox"/> Transportation                    | 10. <input type="checkbox"/> Other                                   |

7b. Is any portion of the proposed activity eligible to be treated as a limited project subject to 310 CMR 10.24 (coastal) or 310 CMR 10.53 (inland)?

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1.  Yes  No If yes, describe which limited project applies to this project:  
 2. Limited Project

8. Property recorded at the Registry of Deeds for:

<b>a. County:</b>	<b>b. Certificate:</b>	<b>c. Book:</b>	<b>d. Page:</b>
WORCESTER		60619	369

**B. Buffer Zone & Resource Area Impacts (temporary & permanent)**

1. Buffer Zone & Resource Area Impacts (temporary & permanent):

This is a Buffer Zone only project - 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)

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
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a. <input type="checkbox"/> Bank	1. linear feet	2. linear feet
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b. <input type="checkbox"/> Bordering Vegetated Wetland	1. square feet	2. square feet
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c. <input type="checkbox"/> Land under Waterbodies and Waterways	1. Square feet	2. square feet
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	3. cubic yards dredged	
--	------------------------	--

d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet	2. square feet
--	----------------	----------------

	3. cubic feet of flood storage lost	4. cubic feet replaced
--	-------------------------------------	------------------------

e. <input type="checkbox"/> Isolated Land Subject to Flooding	1. square feet	
---	----------------	--

	2. cubic feet of flood storage lost	3. cubic feet replaced
--	-------------------------------------	------------------------

f. <input type="checkbox"/> Riverfront Area	1. Name of Waterway (if any)	
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2. Width of Riverfront Area (check one)	<input type="checkbox"/> 25 ft. - Designated Densely Developed Areas only
	<input type="checkbox"/> 100 ft. - New agricultural projects only
	<input type="checkbox"/> 200 ft. - All other projects

3. Total area of Riverfront Area on the site of the proposed project	square feet
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4. Proposed Alteration of the Riverfront Area:	
a. total 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?  Yes  No

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6. Was the lot where the activity is proposed created prior to August 1, 1996?  Yes  No

**3.Coastal Resource Areas: (See 310 CMR 10.25 - 10.35)**

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
a. <input type="checkbox"/> Designated Port Areas	Indicate size under	Land under the ocean below,
b. <input type="checkbox"/> Land Under the Ocean	1. square feet	
	2. cubic yards dredged	
c. <input type="checkbox"/> Barrier Beaches	Indicate size under Coastal Beaches and/or Coastal Dunes, below	
d. <input type="checkbox"/> Coastal Beaches	1. square feet	2. cubic yards beach nourishment
e. <input type="checkbox"/> Coastal Dunes	1. square feet	2. cubic yards dune nourishment
f. <input type="checkbox"/> Coastal Banks	1. linear feet	
g. <input type="checkbox"/> Rocky Intertidal Shores	1. square feet	
h. <input type="checkbox"/> Salt Marshes	1. square feet	2. sq ft restoration, rehab, crea.
i. <input type="checkbox"/> Land Under Salt Ponds	1. square feet	
	2. cubic yards dredged	
j. <input type="checkbox"/> Land Containing Shellfish	1. square feet	
k. <input type="checkbox"/> Fish Runs	Indicate size under Coastal Banks, Inland Bank, Land Under the Ocean, and/or inland Land Under Waterbodies and Waterways, above	
	1. cubic yards dredged	
l. <input type="checkbox"/> Land Subject to Coastal Storm Flowage	1. square feet	

**4.Restoration/Enhancement**

Restoration/Replacement

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 entered the additional amount here.

a. square feet of BVW b. square feet of Salt Marsh

**5.Projects Involves Stream Crossings**

Project Involves Streams Crossings

If the project involves Stream Crossings, please enter the number of new stream crossings/number of replacement stream crossings.

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a. number of new stream crossings

b. number of replacement stream crossings

**C. Other Applicable Standards and Requirements**

**Streamlined Massachusetts Endangered Species Act/Wetlands Protection Act Review**

1. Is any portion of the proposed project located in **Estimated Habitat of Rare Wildlife** as indicated on the most recent Estimated Habitat Map of State-Listed Rare Wetland Wildlife published by the Natural Heritage of Endangered Species program (NHESP)?

a.  Yes  No

If yes, include proof of mailing or hand delivery of NOI to:  
Natural Heritage and Endangered Species  
Program  
Division of Fisheries and Wildlife  
1 Rabbit Hill Road  
Westborough, MA 01581

b. Date of map:FROM MAP VIEWER

If yes, the project is also subject to Massachusetts Endangered Species Act (MESA) review (321 CMR 10.18)...

c. Submit Supplemental Information for Endangered Species Review \* (Check boxes as they apply)

1.  Percentage/acreage of property to be 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

3.  Project plans for entire project site, including wetland/resource areas and areas outside of wetland 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)

b.  Photographs representative of the site

c.  MESA filing fee (fee information available at: <http://www.mass.gov/eea/agencies/dfg/dfw/natural-heritage/regulatory-review/mass-endangered-species-act-mesa/mesa-fee-schedule.html> )

Make check payable to "Natural Heritage & Endangered Species Fund" and **mail to NHESP** at above address

*Projects altering 10 or more acres of land, also submit:*

d.  Vegetation cover type map of site

e.  Project plans showing Priority & Estimated Habitat boundaries

d. OR 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/eea/agencies/dfg/dfw/laws-regulations/cmr/321-cmr-1000-massachusetts-endangered-species-act.html#10.14>; 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 Number

b. Date submitted to NHESP

3.  Separate MESA review completed.

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Include copy of NHESP "no Take" determination or valid Conservation & Management Permit with approved plan.

\* Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review...

2. For coastal projects only, is any portion of the proposed project located below the mean high waterline or in a fish run?  
a.  Not applicable - project is in inland resource area only

b.  Yes  No

If yes, include proof of mailing or hand delivery of NOI to either:

South Shore - Cohasset to Rhode Island, and the Cape & Islands:

North Shore - Hull to New Hampshire:

Division of Marine Fisheries -  
Southeast Marine Fisheries Station  
Attn: Environmental Reviewer  
836 S. Rodney French Blvd  
New Bedford, MA 02744

Division of Marine Fisheries -  
North Shore Office  
Attn: Environmental Reviewer  
30 Emerson Avenue  
Gloucester, MA 01930

If yes, it 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.

3. Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?

a.  Yes  No

If yes, provide name of ACEC (see instructions to WPA Form 3 or DEP Website for ACEC locations). **Note:** electronic filers click on Website.

b. ACEC Name

4. 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?

a.  Yes  No

5. 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

6. 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:

1. 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, Explain why the project is exempt:

1.  Single Family Home

2.  Emergency Road Repair

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- 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**

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 by regular mail delivery.

- 1. USGS 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. (Electronic filers may omit this item.)
- 2. Plans identifying the location of proposed activities (including activities proposed to serve as a Bordering Vegetated Wetland [BVW] replication area or other mitigating measure) relative to the boundaries of each affected resource area.
- 3. Identify the method for BVW and other resource area boundary delineations (MassDEP BVW Field Data Form(s).)
- 4. List the titles and dates for all plans and other materials submitted with this NOI.

**a. Plan Title:                      b. Plan Prepared By:      c. Plan Signed/Stamped By:      c. Revised Final Date:      e. Scale:**

PROPOSED  
SUBSURFACE  
SEWAGE DISPOSAL    KEVIN J. QUINN, PE    QUINN ENGINEERING    1"=20'                      8/19/2021  
SYSTEM REPAIR  
PLAN

- 5. If there is more than one property owner, please attach a list of these property owners not listed on this form.
- 6. Attach proof of mailing for Natural Heritage 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.

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**E. Fees**

1. 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 housing 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:

2. Municipal Check Number	3. Check date
4. State Check Number	5. Check date
6. Payer name on check: First Name	7. Payer name on check: Last Name

**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.

Dante Zamarro	8/25/2021
1. Signature of Applicant	2. Date
Dante Zamarro	8/25/2021
3. Signature of Property Owner(if different)	4. Date
Mia McDonald	8/25/2021
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 Section C, Items 1-3, 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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**Form**  
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**A. Applicant Information**

1. Applicant:

a. First Name	DANTE & PATRICIA	b. Last Name	ZAMARRO		
c. Organization					
d. Mailing Address	12 NIPMUCK ROAD				
e. City/Town	PAXTON	f. State	MA	g. Zip Code	01612
h. Phone Number	5085236135	i. Fax		j. Email	dantezamarro@verizon.net

2. Property Owner:(if different)

a. First Name	DANTE & PATRICIA	b. Last Name	ZAMARRO		
c. Organization					
d. Mailing Address	12 NIPMUCK ROAD				
e. City/Town	PAXTON	f. State	MA	g. Zip Code	01612
h. Phone Number	5085236135	i. Fax		j. Email	dantezamarro@verizon.net

3. Project Location:

a. Street Address	12 NIPMUCK ROAD	b. City/Town	PAXTON
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Are you exempted from Fee?  (YOU HAVE SELECTED 'NO')

**Note:** Fee will be exempted if you are one of the following:

- City/Town/County/District
- Municipal Housing Authority
- Indian Tribe Housing Authority
- MBTA

State agencies are only exempt if the fee is less than \$100

**B. Fees**

Activity Type	Activity Number	Activity Fee	RF Multiplier	Sub Total
E.) WORK ON SEPTIC SYSTEM SEPARATE FROM HOUSE	1	110.00		110.00

City/Town share of filling fee	\$67.50	State share of filing fee	\$42.50	Total Project Fee	\$110.00
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