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Username: LKULHAVY

Transaction ID: 1909604

Document: WPA Form 3 - NOI

Size of File: 274.60K

Status of Transaction: Submitted

Date and Time Created: 7/14/2025:10:11:16 AM

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Massachusetts Department of Environmental

Bureau of Resource Protection - Wetlands

WPA Form 3 - Notice of IntentMassachusetts Wetlands Protection Act M.G.L. c. 131, §40

Provided by MassDEP: MassDEP File #: eDEP Transaction #:1909604 City/Town:HAMILTON

A.General Informati	on					
1. Project Location:						
a. Street Addressb. City/Townd. Latitudef. Map/Plat #	45 CENTRAL PLAC HAMILTON 42.62413N H-37		c. Zip Co e. Longitu g.Parcel/	ude	01982 70.88887W 37-046-0038	
2. Applicant:						
□ Individual □ Organ	nization					
a. First Namec. Organization	LORRAINE & L		b.Last Name	KULHAVY		
d. Mailing Address e. City/Town h. Phone Number	246 HIGHLAND SO. HAMILTON 978-998-2047		MA	g. Zip Code j. Email	01982 kulhavy@verizon.net	
3.Property Owner:						
more than one owner	• 8					
a. First Namec. Organizationd. Mailing Address	LORRAINE & L		b. Last Name	KULHAVY		
e. City/Town h. Phone Number	SO. HAMILTON 978-998-2047		MA	g. Zip Code j.Email	01982 kulhavy@verizon.net	
4.Representative:						
a. First Namec. Organizationd. Mailing Addresse. City/Townh.Phone Number		f. State i.Fax	b. Last Nar	ne	g. Zip Code j.Email	
5.Total WPA Fee Paid (Au	itomatically inserted fr	om NOI Wetlan	d Fee Transmitta	l Form):		
a.Total Fee Paid	110.00 b.State	Fee Paid	42.50 c.C	ity/Town Fee Paid	67.50	
6.General Project Descript ADDITION OF A DININ COTTAGE.		M AND REBU	ILD OF EXIST	ING BATHROOM	M ON AN EXISTING	
7a.Project Type:						
 Single Family Hom Limited Project Dri Dock/Pier Coastal Engineering 	veway Crossing	4. ГО 6. ГО	0 .07		y)	

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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 ✓ Yes ✓ No Limited Project 	If yes, describe which limited	d project applies to this project:			
8.Property recorded at the F	Registry of Deeds for:				
a.County:	b.Certificate:	c.Book:	l.Page:		
	ource Area Impacts (tempo Area Impacts (temporary & perma				
This is a Buffer Zone or Inland Bank, or Coastal Re	7 1 3	located only in the Buffer Zone of a Bo	rdering Vegetated Wetland,		
2.Inland Resource Areas: (See 310 CMR 10.54 - 10.58, if no	at applicable, go to Section B.3. Coasta	al Resource Areas)		
Resource Area		Size of Proposed Alteration Pr	oposed Replacement (if any)		
a.J Bank		1. linear feet	2. linear feet		
b. ☐ Bordering Vegetated V	Wetland	1. square feet	2. square feet		
c. T Land under Waterbod	lies and Waterways	1. Square feet	2. square feet		
		3. cubic yards dredged			
d. T 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		1. Name of Waterway (if any)			
2. Width of Riverfront	Area (check one)	☐ 25 ft Designated Densely Developed Areas only ☐ 100 ft New agricultural projects only ☐ 200 ft All other projects			
3. Total area of Riverfr	ont Area on the site of the propose	d project	square feet		
4. Proposed Alteration	of the Riverfront Area:		square tool		
a. total square feet	b. square feet within 100 ft.	c. square feet between 100 ft. and 200 ft.			
5 Hac an alternatives a	nalysis 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

Resource Area		Size of Proposed Alteration Proposed Replacement (if any)				
a. □ Designated Port Areas	Indicate size under	Land under the ocean below,				
b. ☐ Land Under the Ocean						
	1. square feet					
	2. cubic yards dredged					
c. F Barrier Beaches	Indicate size under Coastal F	Beaches and/or Coatstal Dunes, below				
d. ☐ Coastal Beaches						
	1. square feet	2. cubic yards beach nourishment				
e. Coastal Dunes	1. square feet	2. cubic yards dune nourishment				
f. Coastal Banks	1. square reet	2. Cubic yards danc nourisiment				
i.i. Coastai Danks	1. linear feet					
g. Rocky Intertidal Shores						
	1. square feet					
h. ☐ Salt Marshes	300 N					
	1. square feet	2. sq ft restoration, rehab, crea.				
i. Land Under Salt Ponds	1. square feet					
	1. Square reet					
	2. cubic yards dredged					
j. □ Land Containing Shellfish	and the company of property and the company of the					
	1. square feet					
k. ☐ Fish Runs	Indicate size under Coastal Banks, Inland Bank, Land Under the Ocean, and/or inland Land					
	Under Waterbodies and Wat	terways, above				
	cubic yards dredged					
1. Land Subject to Coastal	1. odolo j dras drouged					
Storm Flowage	1. square feet					
4.Restoration/Enhancement						
☐ Restoration/Replacement						
If the project is for the purpose entered in Section B.2.b or B.3		etland resource area in addition to the square footage that has been dditional amount here.				
a. square feet of BVW	b.	square feet of Salt Marsh				
5.Projects Involves Stream Cro	ssings					
Project Involves Streams C	Salle (1) And the first of the					



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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

- 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. \(\text{Vegetation cover type map of site} \)
- 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. F Separate MESA review ongoing.
 - a. NHESP Tracking Number
 - b. Date submitted to NHESP
 - 3. ☐ Separate MESA review completed.

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



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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. \(\text{Yes} \subset \text{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. r 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
- 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



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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).
- Determination of Applicability, Order of Resource Area Delineation, etc.), and attach documentation of the methodology.
- 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:
SITE MAP WITHOUT ADDITION	EPS ASSOCIATES, LLC	RICHARD CLARKE	5/26/25
SITE MAP WITH PROPOSED ADDITION	EPS ASSOCIATES, LLC	RICHARD CLARKE	5/26/25
BUILDING PLAN	BRUCE GINGRICH		3/28/25
TOWN OF HAMILTON MAP SHOWING CORRECT LOCATION	TOWN RECORDS		

- 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.

Provided by MassDEP:

City/Town:HAMILTON

eDEP Transaction #:1909604

MassDEP File #:



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E. Fees

requirements.

Notice of Intent.

1.	
Fee Exempt: No filing fee shall be assessed for projects of any city, to tribe housing authority, municipal housing authority, or the Massach	own, county, or district of the Commonwealth, federally recognized Indian lusetts 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 Inta and complete to the best of my knowledge. I understand that the Conservation at the expense of the applicant in accordance with the wetlands regulations, 316 I further certify under penalties of perjury that all abutters were notified of this Notice must be made by Certificate of Mailing or in writing by hand delivery or of the property line of the project location. Lorraine Kulhavy	a Commission will place notification of this Notice in a local newspaper 0 CMR 10.05(5)(a). s application, pursuant to the requirements of M.G.L. c. 131, § 40.
1. Signature of Applicant	2. Date
Lorraine & Leo Kulhavy	7/7/2025
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 prom, and the city/town fee payment, to the Conservation Commission by cert	
For MassDEP:	
One copy of the completed Notice of Intent (Form 3), including supporting pla and a copy of the state fee payment to the MassDEP Regional Office (see Instr	
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

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

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WPA Form 3 - Notice of Wetland FeeTransmittal Form

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

Provided by MassDEP: MassDEP File #: eDEP Transaction #:1909604 City/Town:HAMILTON

A. Applicant Information

1. Applicant:					
a. First Namec. Organization	LORRAINE & LEO		b.Last Name	KULHAVY	
d. Mailing Address	246 HIGHLAND ST				
e. City/Town	SO. HAMILTON	f. State	MA	g. Zip Code	01982
h. Phone Number	9789982047	i. Fax		j. Email	kulhavy@verizon.net
2.Property Owner:(if diffe	rent)				
a. First Namec. Organization	LORRAINE & LEO		b. Last Name	KULHAVY	
d. Mailing Address	246 HIGHLAND ST				
e. City/Town	SO. HAMILTON	f.State	MA	g. Zip Code	01982
h. Phone Number	9789982047	i. Fax		j.Email	kulhavy@verizon.net
3. Project Location:					
a. Street Address	45 CENTRAL F	PLACE		b. City/Town	HAMILTON
Are you exempted from	Fee? [(YOU HAVE SEL)	ECTED 'N	iO')		

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
A.) WORK ON SINGLE FAMILY LOT; ADDITION, POOL, ETC.;	1	110.00		110.00
	City/Town	share of filling fee	State share of filing fee To	otal Project Fee

\$67.50

\$42.50

\$110.00