

## **Municipal Affordable Housing Trust**

### **Agenda**

**February 22 2024**

**10:00 AM**

### **Virtual Meeting**

To all residents, this meeting is available to be attended in person and via the Zoom platform. In an effort to ensure citizen engagement and comply with open meeting law regulations, citizens will be able to dial into the meeting using the provided phone number, or citizens can participate by using the Zoom link provided on the agenda.

Please click on <https://zoom.us/j/92872633628> or **call on your phone at 1-929-205-6099, meeting ID is 92872633628.**

1. Vote of the Trust members to authorize the Chair, Chris E. Vericker, to sign an Application for Approval of Definitive Plan, Certificate of Ownership, and Notice of Intent and any other documents as necessary.

Comments: This listing of matters is that reasonably anticipated by the Chair which may be discussed at the meeting. Not all items listed may in fact be discussed and other items not listed may also be brought up for discussion to the extent permitted by law.

This agenda is subject to change.

**FORM C**  
**APPLICATION FOR APPROVAL OF DEFINITIVE PLAN**

To the Planning Board of Franklin:

The undersigned, herewith, submits the accompanying definitive plan for the subdivision entitled “\*\*\*” for approval under the requirements of the Subdivision Control Law and your rules and regulations covering the subdivision of land.

\*\*\* Definitive Subdivision Plan of Land Veterans Memorial Drive Extension

1. Name of Applicant: Town of Franklin  
Address of Applicant: 355 East Central Street Franklin, MA. 02038  
Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_
  
2. Name of Owner (if not the Applicant): Franklin Municipal Affordable Housing Trust  
Address of Owner: 355 East Central Street Franklin, MA. 02038  
Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_
  
3. Name of Engineer: Guerriere & Halnon, Inc.  
Address of Engineer: 55 West Central St. Franklin, MA. 02038  
Phone No.: 508-528-3221 Email: acavaliere@gandhengineering.com
  
4. Deed of Property recorded with Norfolk Registry of Deeds in Book 34282, Page 520, (or Certificate of Title No. \_\_\_\_\_)
  
5. Location and Description of Property: \_\_\_\_\_  
\_\_\_\_\_  
Assessor’s Map & Lot: Map 259 Parcel 007-002
  
6. No. of Lots: 3

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print Name of Applicant

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print Name of Owner

An Assessor’s certified list of all abutters within 300 feet of this subdivision is attached.

CERTIFICATE OF OWNERSHIP

I the undersigned Applicant, do hereby certify to the Town of Franklin, through its Planning Board, that all parties of interest to the below-listed plan are identified in Section B: below,

SECTION A:

Type of Plan (circle one)    ANR 81-P;    Preliminary Subdivision

Definitive Subdivision;    Site Plan;    Special Permit

Title of Plan: Definitive Subdivision Plan of Land Veterans Memorial Drive Extension

Date of Plan: \_\_\_\_\_ Assessor's Information: Map 259 Parcel 007-002

Prepared by: Guerriere & Halnon, Inc.

Applicant Name & Address: Town of Franklin 355 East Central Street  
Franklin, MA. 02038

SECTION B:

Name of Record Owner(s): Franklin Municipal Affordable Housing Trust

Address of Record Owner(s): 355 East Central Street Franklin, MA. 02038

**\*\*Attach Property Deed matching the owner name's listed above.**

\*If in the name of a Trust, Corporation or Partnership, list the names and addresses of all Trustee(s), Corporate Officer(s) or Partner(s):  
\_\_\_\_\_

\*If in the name of a Trust or Corporation, list the Beneficiary(ies) of the Trust or the Shareholder(s) of the Corporation:  
\_\_\_\_\_

\*If in the name of a Trust or Corporation, list the date, county, book and page of recording of the Trust Instrument, or the date and State of incorporation:  
\_\_\_\_\_

Executed as a sealed instrument this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Print name of Applicant

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print name of Owner

COMMONWEALTH OF MASSACHUSETTS

\_\_\_\_\_ ss. \_\_\_\_\_ 20\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_ (*name of owner*), proved to me through satisfactory evidence of identification, which were \_\_\_\_\_ to be the person whose name is signed on the preceding document in my presence.

\_\_\_\_\_  
(*Official signature and seal of notary*)

Notary Public:

My Commission Expires: \_\_\_\_\_

*Standard 10: All illicit discharges to the stormwater management system are prohibited.*

*Standard 10 prohibits illicit discharges to stormwater management systems. The stormwater management system is the system for conveying, treating, and infiltrating stormwater on site, including stormwater best management practices and any pipes intended to transport stormwater to the ground water, a surface water, or municipal separate storm sewer system. Illicit discharges to the stormwater management system are discharges that are not entirely comprised of stormwater. Notwithstanding the foregoing, an illicit discharge does not include discharges from the following activities or facilities: firefighting, water line flushing, landscape irrigation, uncontaminated ground water, potable water sources, foundation drains, air conditioning condensation, footing drains, individual resident car washing, flows from riparian habitats and wetlands, dechlorinated water from swimming pools, water used for street washing and water used to clean residential buildings without detergents.*

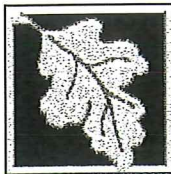
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#### **Illicit Discharge Compliance Statement**

It is the intent of the Applicant, Franklin Municipal Affordable Housing Trust, 355 East Central Street, Franklin, MA 02038 to prevent illicit discharges to the stormwater management system, including wastewater discharges and discharges of stormwater contaminated by contact with process wastes, raw materials, toxic pollutants, hazardous substances, oil, or grease. There will be no connection to the storm water system to inadvertently direct other types of liquids, chemicals or solids into the storm drainage system. The Owner will also promote a clean Green Environment by mitigating spills onto pavements; oils, soda, chemicals, pet waste, debris and litter.

Respectfully Acknowledged,

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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 Number

Document Transaction Number

Franklin

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.

**A. General Information**

1. Project Location (**Note:** electronic filers will click on button to locate project site):

Veterans Memorial Drive Extension  
a. Street Address

Franklin  
b. City/Town

02038  
c. Zip Code

Latitude and Longitude:  
-71.41651  
d. Latitude

42.09532  
e. Longitude

259  
f. Assessors Map/Plat Number

007-002  
g. Parcel /Lot Number

2. Applicant:

a. First Name  
Town of Franklin

b. Last Name

c. Organization

355 East Central Street  
d. Street Address

Franklin  
e. City/Town

MA  
f. State

02038  
g. Zip Code

h. Phone Number

i. Fax Number

j. Email Address

3. Property owner (required if different from applicant):  Check if more than one owner

a. First Name  
Franklin Municipal Affordable Housing Trust

b. Last Name

c. Organization

355 East Central Street  
d. Street Address

Franklin  
e. City/Town

MA.  
f. State

02038  
g. Zip Code

h. Phone Number

i. Fax Number

j. Email address

4. Representative (if any):

Amanda  
a. First Name

Cavaliere  
b. Last Name

Guerriere & Halnon, Inc.  
c. Company

55 West Central Street  
d. Street Address

Franklin  
e. City/Town

MA.  
f. State

02038  
g. Zip Code

508.528.3221  
h. Phone Number

i. Fax Number

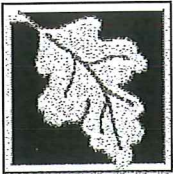
acavaliere@gandhengineering.com  
j. Email address

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

Exempt  
a. Total Fee Paid

Exempt  
b. State Fee Paid

Exempt  
c. City/Town Fee Paid



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 Bureau of Resource Protection - Wetlands  
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**A. General Information (continued)**

6. General Project Description:

To construct a roadway and drainage to provide 3 lots for housing for the Town of Franklin

7a. Project Type Checklist: (Limited Project Types see Section A. 7b.)

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

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

1.  Yes  No      If yes, describe which limited project applies to this project. (See 310 CMR 10.24 and 10.53 for a complete list and description of limited project types)

2. Limited Project Type

If the proposed activity is eligible to be treated as an Ecological Restoration Limited Project (310 CMR 10.24(8), 310 CMR 10.53(4)), complete and attach Appendix A: Ecological Restoration Limited Project Checklist and Signed Certification.

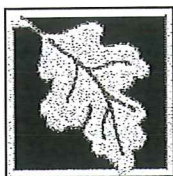
8. Property recorded at the Registry of Deeds for:

Norfolk	
a. County	b. Certificate # (if registered land)
34282	520
c. Book	d. Page Number

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

- 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.
- 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 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.



Massachusetts Department of Environmental Protection  
Bureau of Resource Protection - Wetlands

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

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

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
a. <input type="checkbox"/> Bank	1. linear feet	2. linear feet
b. <input checked="" type="checkbox"/> Bordering Vegetated Wetland	980+/- 1. square feet	1,960+/- 2. square feet
c. <input type="checkbox"/> Land Under Waterbodies and Waterways	1. square feet 3. cubic yards dredged	2. square feet

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet 3. cubic feet of flood storage lost	2. square feet 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 available) - <b>specify coastal or inland</b>	

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 Riverfront Area on the site of the proposed project:

square feet

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.

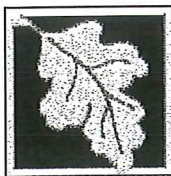
5. Has an alternatives analysis been done and is it attached to this NOI?  Yes  No

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)

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





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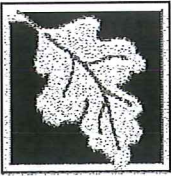
City/Town

**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.

Online Users:  
 Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the Department.

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
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 Beach	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
	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
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., creation
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. <input type="checkbox"/> 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 Salt Marsh
5. <input type="checkbox"/> Project Involves Stream Crossings		
	_____	_____
	a. number of new stream crossings	b. number of replacement stream crossings



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**C. Other Applicable Standards and Requirements**

- This is a proposal for an Ecological Restoration Limited Project. Skip Section C and complete Appendix A: Ecological Restoration Limited Project Checklists – Required Actions (310 CMR 10.11).

**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 and Endangered Species Program (NHESP)? To view habitat maps, see the *Massachusetts Natural Heritage Atlas* or go to [http://maps.massgis.state.ma.us/PRI\\_EST\\_HAB/viewer.htm](http://maps.massgis.state.ma.us/PRI_EST_HAB/viewer.htm).

- 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**

On-line \_\_\_\_\_

b. Date of map \_\_\_\_\_

If yes, the project is also subject to Massachusetts Endangered Species Act (MESA) review (321 CMR 10.18). To qualify for a streamlined, 30-day, MESA/Wetlands Protection Act review, please complete Section C.1.c, and include requested materials with this Notice of Intent (NOI); *OR* complete Section C.2.f, if applicable. *If MESA supplemental information is not included with the NOI, by completing Section 1 of this form, the NHESP will require a separate MESA filing which may take up to 90 days to review (unless noted exceptions in Section 2 apply, see below).*

- c. Submit Supplemental Information for Endangered Species Review\*

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

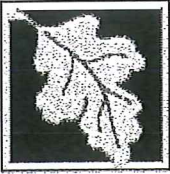
2.  Project plans for entire project site, including wetland resource areas and areas outside of wetlands jurisdiction, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work \*\*

(a)  Project description (including description of impacts outside of wetland resource area & buffer zone)

(b)  Photographs representative of the site

\* 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.



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

- (c)  MESA filing fee (fee information available at [http://www.mass.gov/dfwele/dfw/nhosp/regulatory\\_review/mesa/mesa\\_fee\\_schedule.htm](http://www.mass.gov/dfwele/dfw/nhosp/regulatory_review/mesa/mesa_fee_schedule.htm)). Make check payable to "Commonwealth of Massachusetts - NHESP" 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
- (f) 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/dfwele/dfw/nhosp/regulatory\\_review/mesa/mesa\\_exemptions.htm](http://www.mass.gov/dfwele/dfw/nhosp/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" determination or valid Conservation & Management Permit with approved plan.
3. 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:

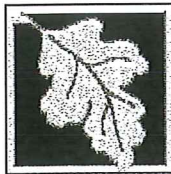
South Shore - Cohasset to Rhode Island border, and the Cape & Islands:

Division of Marine Fisheries -  
Southeast Marine Fisheries Station  
Attn: Environmental Reviewer  
836 South Rodney French Blvd.  
New Bedford, MA 02744  
Email: [DMF.EnvReview-South@state.ma.us](mailto:DMF.EnvReview-South@state.ma.us)

North Shore - Hull to New Hampshire border:

Division of Marine Fisheries -  
North Shore Office  
Attn: Environmental Reviewer  
30 Emerson Avenue  
Gloucester, MA 01930  
Email: [DMF.EnvReview-North@state.ma.us](mailto: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)?  
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.  
b. ACEC
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?  
a.  Yes  No
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:  
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. 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**

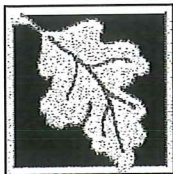
- This is a proposal for an Ecological Restoration Limited Project. Skip Section D and complete Appendix A: Ecological Restoration Notice of Intent – Minimum Required Documents (310 CMR 10.12).

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.  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.

**Online Users:**  
Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the Department.



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**D. Additional Information (cont'd)**

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.

Definitive Subdivision Plan of Land Veterans Memorial Drive Extension Franklin, Massachusetts

a. Plan Title

Guerriere & Halnon, Inc.

Dale MacKinnon

b. Prepared By

c. Signed and Stamped by

February 12, 2024

As Noted

d. Final Revision Date

e. Scale

f. Additional Plan or Document Title

g. Date

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.

**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. Payor name on check: First Name

7. Payor name on check: 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.



**Massachusetts Department of Environmental Protection**  
 Bureau of Resource Protection - Wetlands  
**NOI Wetland Fee Transmittal Form**  
 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. Applicant Information**

1. Location of Project:

Veterans Memorial Drive Extension \_\_\_\_\_ Franklin \_\_\_\_\_  
 a. Street Address b. City/Town  
 Exempt \_\_\_\_\_ Exempt \_\_\_\_\_  
 c. Check number d. Fee amount

2. Applicant Mailing Address:

\_\_\_\_\_ b. Last Name \_\_\_\_\_  
 a. First Name  
 Town of Franklin \_\_\_\_\_  
 c. Organization  
 355 East Central Street \_\_\_\_\_  
 d. Mailing Address  
 Franklin \_\_\_\_\_ MA \_\_\_\_\_ 02038 \_\_\_\_\_  
 e. City/Town f. State g. Zip Code  
 \_\_\_\_\_  
 h. Phone Number i. Fax Number j. Email Address

3. Property Owner (if different):

\_\_\_\_\_ b. Last Name \_\_\_\_\_  
 a. First Name  
 Franklin Municipal Affordable Housing Trust \_\_\_\_\_  
 c. Organization  
 355 East Central Street \_\_\_\_\_  
 d. Mailing Address  
 Franklin \_\_\_\_\_ MA \_\_\_\_\_ 02038 \_\_\_\_\_  
 e. City/Town f. State g. Zip Code  
 \_\_\_\_\_  
 h. Phone Number i. Fax 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.

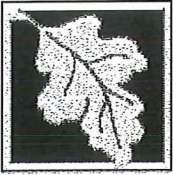
**Step 2/Number of Activities:** Identify the number of each type of activity.

**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

**Step 5/Total Project Fee:** \_\_\_\_\_

**Step 6/Fee Payments:**

Total Project Fee: \_\_\_\_\_  
 a. Total Fee from Step 5

State share of filing Fee: \_\_\_\_\_  
 b. 1/2 Total Fee **less** \$12.50

City/Town share of filing Fee: \_\_\_\_\_  
 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.)



## Town of Franklin Conservation Commission

### APPLICATION PROCESS SIGNATURE FORM

There are three different applications that can be submitted to undertake work in a jurisdictional area: a Notice of Intent (NOI), a Request for Determination (RDA) and a Minor Buffer Zone Activity (MBZA). All three applications have different criteria for submission and approval and the NOI and RDA are governed by both the state law and the local bylaw. The MBZA is issued under the local bylaw only.

When a potential applicant requests advice from the Conservation Agent on which application to file, the opinion of the Agent is based on the information given by the potential applicant and any other information available to the Agent, e.g. the town's GIS system. The Agent has no legal right to go onto private property at any time until after an application is filed or permission of the property owner is given.

It is important that all applicants understand that after an application is filed, additional information may come to light e.g. via a field inspection or a review of the application, that may impact the scope of the submitted application and the approval process. **Therefore, it is the ultimate responsibility of the applicant to decide which application to file.**

In light of the above, please sign below indicating an understanding of this policy and submit it with the application.

---

Signature of Property Owner

---

Date

**Town of Franklin Conservation Commission**

**PROPERTY ACCESS SIGNATURE FORM**

I hereby request that the Franklin Conservation Commission review this NOI/RDA/ANRAD application. I (we) grant authority to the Franklin Conservation Commission members and agents to go onto my (our) property solely for purposes directly related to the inspection and approval of this application and for follow-up compliance with the permit conditions.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date



Roads	___ linear feet x \$2.00	=	___
*Drainage Structures	___ X \$10.00 each	=	___
Wetland Resource Area Disturbed	___ square feet x \$0.50	=	___
Buildings	___ X \$125 each	=	___
All Accessory Improvements	\$100.00	=	___

2. **REQUEST FOR DETERMINATION (RDA)** \$100.00

3. **MINOR BUFFER ZONE ACTIVITY (MBZA)** \$50.00

4. **ABBREVIATED NOTICE OF RESOURCE AREA DETERMINATION (ANRAD)**

\$0.50/foot/resource area: = \_\_\_

5. **OTHER PERMITS/SERVICES**

Order of Conditions Extension	\$50.00	___
Certificate of Compliance Request	\$50.00	___
Certificate Re-Inspection	\$50.00	___
Status Letter for Financial Institution	\$100.00	___
Permit Amendment	\$100.00	___

6. **FILING FEE CALCULATION**

**Town Share of State Fees** (See NOI Wetland Fee Transmittal Form) \$ Fee Exempt

**Local Filing Fee Calculated Above** \$ Fee Exempt

**TOTAL Due Town of Franklin (Check No.1)** \$ Fee Exempt

**State Share of Filing Fee** (See NOI Wetland Fee Transmittal Form)

**TOTAL Due DEP (Check No. 2)** \$ Fee Exempt

7. **ADVERTISING FEE (Check No. 3)** **TBD**

The fee will be the exact amount the newspaper charges for that specific advertisement. Once the advertisement is placed with the paper, by the Conservation Commission, the applicant will be notified of the cost and will be expected to submit a check for that exact amount, payable to the Town of Franklin, to the Conservation Department prior to the first hearing.

\*Drainage structures: catch basins, manholes, leaching basins, gutter inlet or any other man-made structure (other than a pipe) for purposes of controlling drainage.