

NOTICE OF PUBLIC HEARING SUDBURY CONSERVATION COMMISSION

The Sudbury Conservation Commission will hold a public hearing to review the Notice of Intent filing under the Wetlands Protection Act and Wetlands Bylaw for tree removal at 70 Firecut Lane, Sudbury MA, Andrew Goodman, applicant. The hearing will be held virtually on Thursday, September 24, at 6:45pm, via Zoom. Please see the Conservation Commission web page for further information.

<https://sudbury.ma.us/conservationcommission/meeting/conservation-commission-meeting-thursday-september-24-2020//> .

SUDBURY CONSERVATION COMMISSION
September 3, 2020

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 #:1215038
City/Town:SUDBURY

A.General Information

1. Project Location:

a. Street Address 70 FIRECUT LANE
b. City/Town SUDBURY c. Zip Code 01776
d. Latitude 42.38887N e. Longitude 71.45944W
f. Map/Plat # G04 g.Parcel/Lot # 0429

2. Applicant:

Individual Organization

a. First Name ANDREW b.Last Name GOODMAN
c. Organization
d. Mailing Address 70 FIRECUT LANE
e. City/Town SUDBURY f. State MA g. Zip Code 01776
h. Phone Number 617-792-2409 i. Fax j. Email andrewgoodman3618@gmail.com

3.Property Owner:

more than one owner

a. First Name ANDREW b. Last Name GOODMAN
c. Organization
d. Mailing Address 70 FIRECUT LANE
e. City/Town SUDBURY f.State MA g. Zip Code 01776
h. Phone Number 617-792-2409 i. Fax j.Email andrewgoodman3618@gmail.com

4.Representative:

a. First Name b. Last Name
c. Organization
d. Mailing Address
e. City/Town f. State g. Zip Code
h.Phone Number i.Fax j.Email

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

a.Total Fee Paid 0.00 b.State Fee Paid 0.00 c.City/Town Fee Paid 0.00

6.General Project Description:

TREE REMOVAL WITHIN THE 100 BUFFER ZONE TO WETLANDS.

7a.Project Type:

- 1. Single Family Home
2. Residential Subdivision
3. Limited Project Driveway Crossing
4. Commercial/Industrial
5. Dock/Pier
6. Utilities
7. Coastal Engineering Structure
8. Agriculture (eg., cranberries, forestry)
9. Transportation
10. 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:

a.County:	b.Certificate:	c.Book:	d.Page:
SOUTHERN MIDDLESEX		55097	323

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	
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d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet	2. square feet
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	3. cubic feet of flood storage lost	4. cubic feet replaced
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e. <input type="checkbox"/> Isolated Land Subject to Flooding	1. square feet	
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	2. cubic feet of flood storage lost	3. cubic feet replaced
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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). 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:

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.

Andrew Goodman	8/10/2020
_____	_____
1. Signature of Applicant	2. Date
Andrew & Rachel Goodman	8/10/2020
_____	_____
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 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.

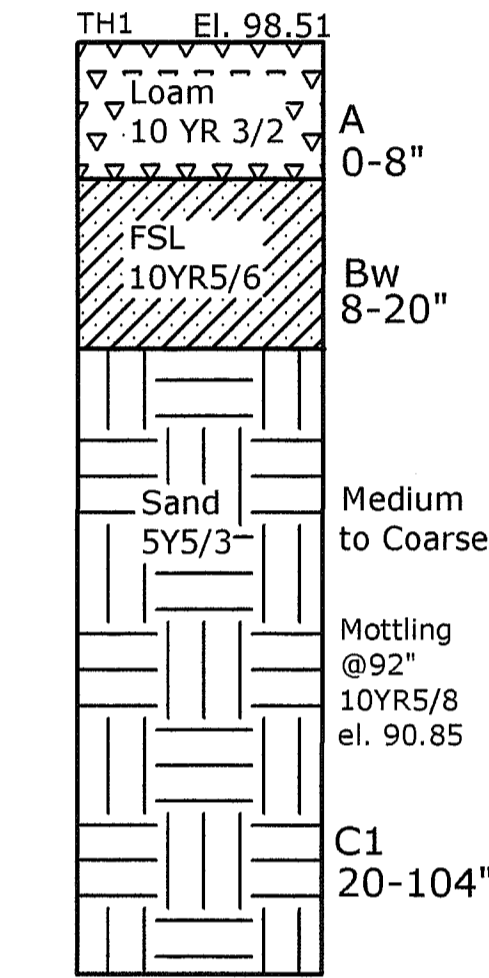
SCHEDULE OF ELEVATIONS

at Foundation 96.46
 Septic Tank Inlet Invert 96.06
 Septic Tank Outlet Invert 95.89
 D-Box Inlet Invert 95.82
 D-Box Outlet Invert 95.65

Leaching Bed Beg. Invert 95.58
 Leaching Bed End Invert 95.35
 Leaching Bed Bottom Invert 94.85
 Design Groundwater Elevation 90.85

SOIL LOGS

dated Conducted: November 25th, 2003
 conducted by: William C. Murphy
 Witnessed by: Bob Leupold, Sudbury Health Dept.

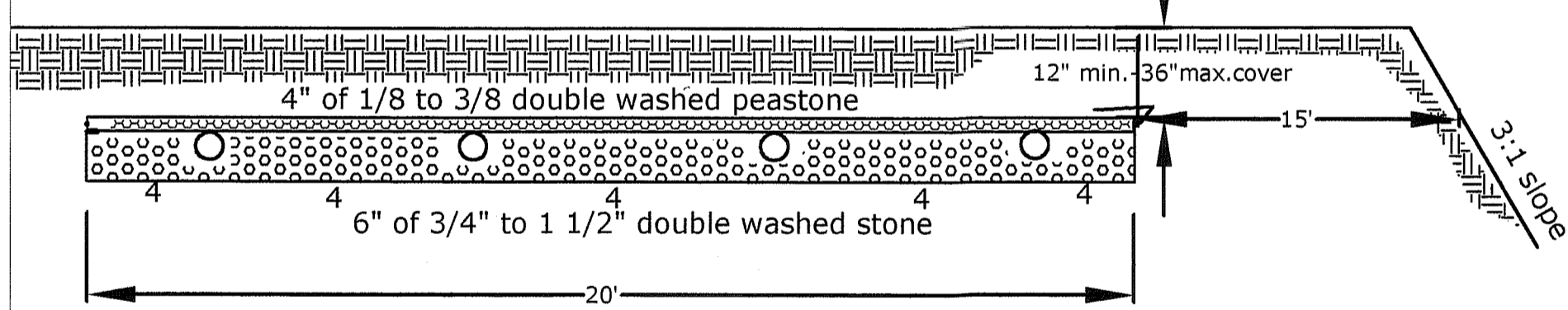


not to scale

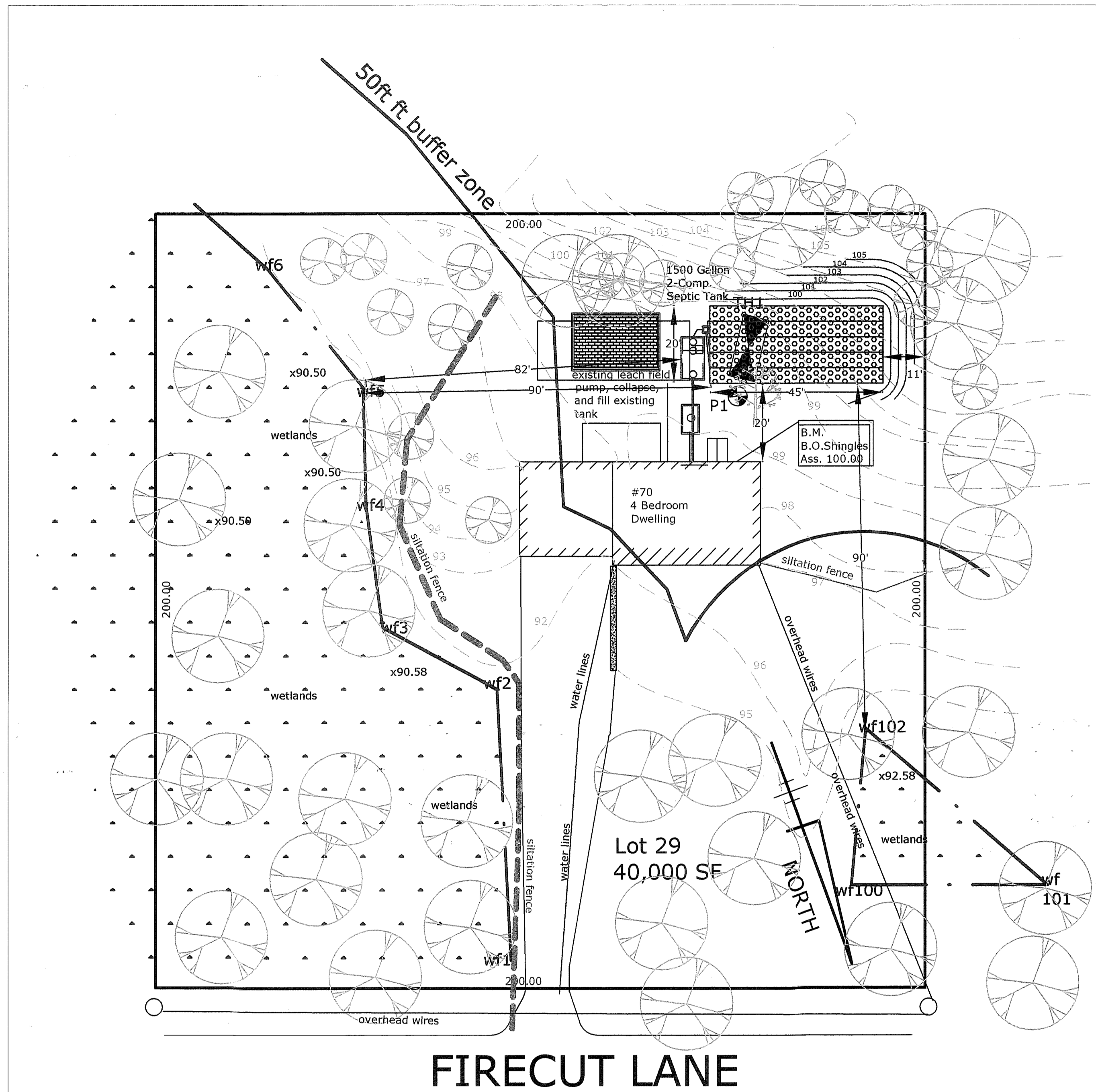
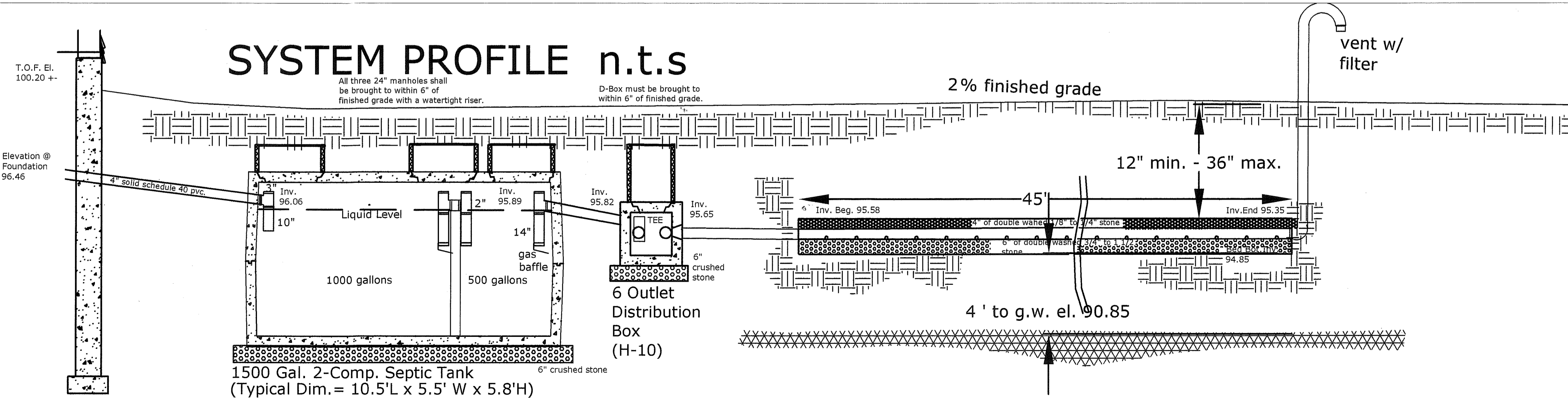
Percolation Test #1 @36" <2MPI

1. William Murphy, certify that on 10/94 I passed the examination approved by the DEP and that the above analysis has been performed by me consistent with the training, expertise, and experience described in 310 CMR 15.018 (2).

Leaching Bed Detail n.t.s.



SYSTEM PROFILE n.t.s



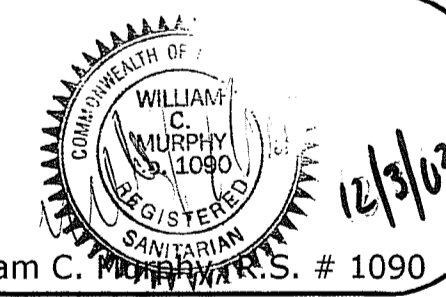
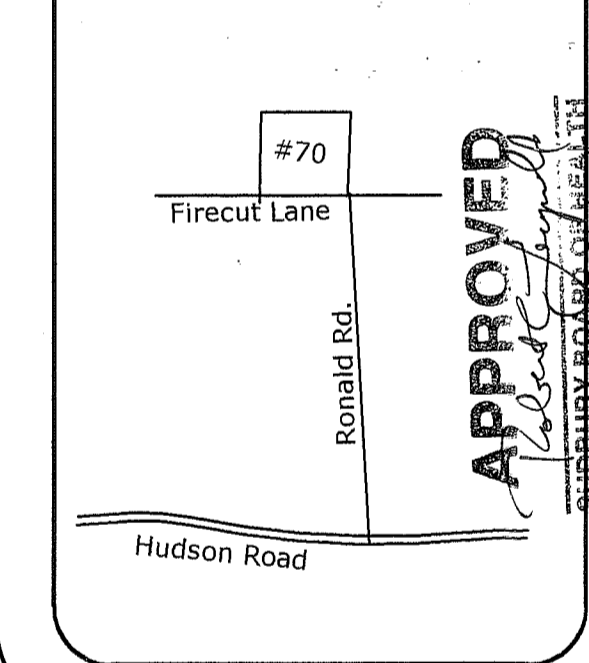
Design Criteria

Number of Bedrooms (design): 4
 Design Flow:
 4 Bdrms @ 110 GPD/Bdrm
 = 440 GPD
 Soil Class: I
 Effluent Loading Rate: .74 Gal./Day/Sq.Ft.
 Type of Soil Absorption System (SAS): Leaching Bed
 Garbage Disposal Allowance? NO (The use of garbage disposals may cause the premature failure of the SAS) Increase Leaching 150%
 Leaching Area Required: 900 SF
 Leaching Area Provided: 900 SF
 20 ft x 45 ft x .5 ft = 900 SF

Variance Request

1. A leaching bed is proposed.
 Local Upgrade
 15,405 Reduction in offset from SAS bottom to groundwater from 5' to 4'.

Locus Map



Legend

- Ex. Contour
- Prop. Contour
- f.g. finished grade
- ex limit of excavation
- ⊗ deep test hole
- ⊙ percolation test
- ⊗ tree

General Notes

1. All engineering and installation of the septic system shall be in accordance with Title 5 and the Sudbury Board of Health Regulations.
2. The contractor must have a valid license in the Town of Sudbury.
3. All survey information was obtained from plan Perkins 8/1972. The plot plan is for septic design purposes only and shall not be used to establish lot lines.
4. The contractor is responsible for contacting DigSafe 1-888-344-7233.
5. Elevations are based on assumed datum unless otherwise noted.
6. The design is based upon soil being consistent throughout the area. Any observation that differs from the test holes must be brought to the attention of the designer. The designer is not responsible for untested areas.
7. The contractor is responsible for contacting the design engineer and the local Board of Health 48 hours prior to any requested inspection.
8. After the installation and prior to backfilling, the contractor must stake and flag the outer boundaries of the soil absorption system. These markings must remain in place until the Certificate of Compliance is issued by the Board of Health. No heavy equipment shall pass over the system.
9. The existing system shall be pumped, collapsed, and filled with clean sand.
10. It is recommended that the septic tank be pumped a minimum of every two years, annually with a garbage disposal.
11. All piping shall be schedule 40 pvc unless otherwise specified.
12. All piping (with the exception of the soil absorption system) shall be bedded in fill free from stones and boulders. The lettering on the pipes shall be visible to verify pipe specifications.
13. Extension manholes will be required for the all septic tank covers to extend within 6 inches of finished grade. The tank shall have a minimum cover of 9 inches.
14. An extension manhole for the distribution box shall be brought to within 6 inches of finished grade.
15. Fill for the system shall be comprised of clean granular sand, free from organic matter and deleterious substances. Mixtures and layers of different soil classes shall not be used. The fill shall contain any material larger than two inches. A sieve analysis, using a #4 sieve shall be performed on a representative sample of the fill. Up to 45% by weight of the fill sample may be retained on a #4 sieve. Sieve analysis shall also be performed on a fraction of the fill sample passing through the #4 sieve, such analysis also shall be demonstrated that the material meets each of the specifications of 310 CMR 15.255 (3).
16. Where fill is required to replace unsuitable or impermeable soils, the excavation of the unsuitable material (topsoil, subsoil, and any deleterious material) shall extend a minimum of five feet laterally in all directions beyond the outer perimeter of the soil absorption system to a depth of 6 inches into the naturally occurring pervious material as required by 310 CMR 15.240 and replaced with the fill specified above.
17. The bottom of the excavation shall be scarified and relatively dry. Fill shall not be placed in rain or snow storms. If the water table elevation is above the elevation to the bottom of the excavation, the excavation shall be dewatered.
18. Soil Absorption System
19. All piping shall be schedule 40 pvc and shall be connected with joints that are watertight and in sound condition.
20. The first two feet of the distribution lines (from D-Box) shall be level.
21. The orifices shall be evenly spaced along two rows running the length of the line, on each side, midway between the invert, and the centerline which separates the upper and lower halves of the pipe. For gravity systems, the orifices shall be no smaller than 1/4 inch and no larger than 3/8 inch in diameter.
22. A 2% slope must be maintained over the SAS for a finished grade so that the water will drain away.
23. No permanent structures must be placed over the SAS or 100% reserve area.
24. The ends of the distribution lines must be capped or plugged if unvented.
25. Only double washed stone is permitted to be used for the soil absorption system (less than .2% material finer than the number 200 sieve as determined by AASHTO method T-11 and T-27).

No.	Revision/Issue	Date

Firm Name and Address
PureGround Engineering
 William C. Murphy
 P.O. Box 312
 Weston, MA
 (508) 652-9889

Project Name and Address
PLAN OF PROPOSED SEPTIC SYSTEM
 at
 #70 Firecut Lane
 Sudbury, MA
 Chris Vickers
 (978) 579-9945

Project	70 Firecut	Sheet	
Date	12/3/03	Page	1 of 1
Scale	1" = 20 feet		

Map3

70 FIRECUT LANE, SUDBURY MA 01776

