

NOTICE OF PUBLIC MEETING SUDBURY CONSERVATION COMMISSION

The Sudbury Conservation Commission will hold a public meeting to review the Request for Determination of Applicability filing, under the State Act and local Wetland Bylaw, to remove and replace the existing septic system within the 100-foot Buffer Zone and 200-foot Riverfront Area, at 4 Revere Street. Judy Sletzinger, Applicant. The hearing will be held on Monday, April 26, 2021 at 6:45 pm, via remote participation

Please see the Conservation Commission web page for further information.

https://sudbury.ma.us/conservationcommission/meeting/conservation-commission-meeting-monday-april-26-2021/

SUDBURY CONSERVATION COMMISSION April 12, 2021



Massachusetts Department of Environmental Protection Bureau of Resource Protection - Wetlands

Sudbury

WPA Form 1- Request for Determination of Applicability Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

City/Town

A. General Information

Important:
When filling out
forms on the
computer, use
only the tab key
to move your
cursor - do not
use the return
key.





1. A	Applicant:			
J	ludy Sletzinger			
	lame	E-Mail Address		
	Revere Street	a.,aa.cos		
N	failing Address			
	Sudbury	MA	01776	
С	ity/Town	State	Zip Code	
P	hone Number	Fax Number (if	annila akila)	
2. R	Representative (if any):	i ax ivuilibei (ii	арріісавіе)	
	1. J. DiModica Excavating			
	im			
	1ike DiModica	midimediae	Number	
C	ontact Name	mjdimodica@ E-Mail Address	gverizon.net	
1	9 Christopher Lane	L-Mail Address		
M	ailing Address			
	udbury	MA	04776	
	ity/Town	State	01776 Zip Code	
9	78 443 8433			
PI	hone Number	hone Number 978 443 0682 Fax Number (if applicable)		
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3. D	Determinations	rax Number (ii s	applicable)	
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	request the Sudbury make the following Conservation Commission	ng determination(s)	. Check any that apply	
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AREA

Received
APR 0.9 2021
Sudbury Conservation Department



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Sudbury City/Town

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C.	Pro.	ect	Desc	ription
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4 Revere Street	Sudbury
Street Address	City/Town
K05	412
Assessors Map/Plat Number	Parcel/Lot Number
b. Area Description (use additional paper, if nec	
Single family residential lot	
c. Plan and/or Map Reference(s):	
Subsurface Sewage Disposal System - Repair	3/30/21
c. Plan and/or Map Reference(s): Subsurface Sewage Disposal System - Repair Title	3/30/21 Date
Subsurface Sewage Disposal System - Repair Title	Date
Subsurface Sewage Disposal System - Repair	
Subsurface Sewage Disposal System - Repair Title	Date



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C. Project Description (cont.)	
h Identify provisions of the Methanda Danta time a	

	a. If this application is a Request for Determination of Scope of Alternatives Riverfront Area, indicate the one classification below that best describes the	s for work in the project.
	☐ Single family house on a lot recorded on or before 8/1/96	
	☐ Single family house on a lot recorded after 8/1/96	
	Expansion of an existing structure on a lot recorded after 8/1/96	
	Project, other than a single-family house or public project, where the app before 8/7/96	olicant owned the lot
	☐ New agriculture or aquaculture project	
	☐ Public project where funds were appropriated prior to 8/7/96	
	Project on a lot shown on an approved, definitive subdivision plan where restriction limiting total alteration of the Riverfront Area for the entire sub-	there is a recorded de division
	Residential subdivision; institutional, industrial, or commercial project	
	☐ Municipal project	
	☐ District, county, state, or federal government project	
	Project required to evaluate off-site alternatives in more than one municipe Environmental Impact Report under MEPA or in an alternatives analysis application for a 404 permit from the U.S. Army Corps of Engineers or 40 Certification from the Department of Environmental Protection.	pursuant to an
	b. Provide evidence (e.g., record of date subdivision lot was recorded) supprabove (use additional paper and/or attach appropriate documents, if necessary	porting the classification



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D. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Request for Determination of Applicability and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge.

I further certify that the property owner, if different from the applicant, and the appropriate DEP Regional Office were sent a complete copy of this Request (including all appropriate documentation) simultaneously with the submittal of this Request to the Conservation Commission.

Failure by the applicant to send copies in a timely manner may result in dismissal of the Request for Determination of Applicability.

Name and address of the property owner:	
JUDY SLETZINGER	
Name 4 REVERE ST	
Mailing Address SUOBULY	
City/Town MA	01776
State	Zip Code
Signatures:	
I also understand that notification of this Request will be placed in accordance with Section 10.05(3)(b)(1) of the Wetlands Prote	d in a local newspaper at my expense ection Act regulations.
Signature of Applicant	4 /7/21 Date
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