

Massachusetts Department of Environmental Protection

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Massachusetts Department of Environmental Protection

Bureau of Resource Protection-Wetlands

CHILMARK City/ Town

Submittal Platform for WPA Form 1 - Request for Determination of Applicability

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

A. General Info	rmation					
1. Project Location:						
a. Street Address	21 ELIOT AVE					
b. City/Town	CHILMARK	▼	c. State	MA	d. Zip Code	02535
e. Latitude	41.32445	N	f. Longitude	70.75869	W	
g. Map/Plat#	33		h. Parcel/Lot#	28		
i. Project Description NEW SCREEN PORCH BUILT ON TOP OF EXIST. EXT. DECK						
2. Applicant:						
a. First Name	CASEY	b. Last Name			DECKER	
c. Organization						
d. Mailing Address	PO BOX 919					
e. City/Town	VINEYARD HAVEN	f. State	e MA		g. Zip Code	02568
h. Phone Number	774-563-8535	i. Email	casey@mvengineering.design			
3. Property Owner:						
more than one owner						
a. First Name	ROBERT MANDEL TRUSTEE b. Last Name					
c. Organization						
d. Mailing Address 190 RIVERSIDE PENTHOUSE						
e. City/Town	BEVERLY HILLS	f. State	CA ollievine@comcast.net		g. Zip Code	90211
h. Phone Number	508-527-4643	i. Email				

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