



Massachusetts Department of Environmental Protection
 Bureau of Water Resources - Wetlands

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

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. Applicant:

John	Hobby	
First Name	Last Name	
82 Hammett Rd		
Address		
Chilmark	MA	02535
City/Town	State	Zip Code
508-642-0831	jnapior@gmail.com	
Phone Number	Email Address	

2. Property Owner (if different from Applicant):

_____	_____	
First Name	Last Name	

Address		
_____	_____	_____
City/Town	State	Zip Code
_____	_____	
Phone Number	Email Address (if known)	

3. Representative (if any)

_____	_____	
First Name	Last Name	

Company Name		

Address		
_____	_____	_____
City/Town	State	Zip Code
_____	_____	
Phone Number	Email Address (if known)	

B. Project Description

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

82 Hammett Rd	Chilmark, MA
Street Address	City/Town
41.38431	71.73969
Latitude (Decimal Degrees Format with 5 digits after decimal e.g. XX.XXXXX)	Longitude (Decimal Degrees Format with 5 digits after decimal e.g. -XX.XXXXX)
9	9
Assessors' Map Number	Assessors' Lot/Parcel Number

b. Area Description (use additional paper, if necessary):
 The front land between the house and water. Combination of private common. See attached

c. Plan and/or Map Reference(s): (use additional paper if necessary)

_____	_____
Title	Date
_____	_____
Title	Date

[How to find Latitude and Longitude](#)

[and how to convert to decimal degrees](#)



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C. Determinations

1. I request the CHILMARK Conservation Commission make the following determination(s). Check any that apply:

N/A a. whether the **area** depicted on plan(s) and/or map(s) referenced above is an area subject to jurisdiction of the Wetlands Protection Act.

N/A b. whether the **boundaries** of resource area(s) depicted on plan(s) and/or map(s) referenced above are accurately delineated.

c. whether the **Activities** depicted on plan(s) referenced above is subject to the Wetlands Protection Act and its regulations.

d. whether the area and/or Activities depicted on plan(s) referenced above is subject to the jurisdiction of any **municipal wetlands' ordinance or bylaw** of:

CHILMARK
Name of Municipality

N/A e. whether the following **scope of alternatives** is adequate for Activities in the Riverfront Area as depicted on referenced plan(s).

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.

Signatures:

I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

[Signature]
Signature of Applicant

4/15/24
Date

Signature of Representative (if any)

Date