



**Massachusetts Department of Environmental Protection**  
 Bureau of Resource Protection - Wetlands  
**WPA Form 4A – Abbreviated Notice of Resource Area Delineation**  
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

Provided by DEP:

DEP File Number

Document Transaction Number

City/Town

**A. General Information**

1. Project Type:

- a.  Resource Area Delineation Only
- b.  Resource Area Delineation Subject to Simplified Review

2. Project Location (**Note:** electronic filers will click on button for GIS locator):

a. Street Address \_\_\_\_\_ b. City/Town \_\_\_\_\_ c. Zip Code \_\_\_\_\_

Latitude and Longitude: \_\_\_\_\_ d. Latitude \_\_\_\_\_ e. Longitude \_\_\_\_\_

f. Assessors Map/Plat Number \_\_\_\_\_ g. Parcel /Lot Number \_\_\_\_\_

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



3. Applicant:

a. First Name \_\_\_\_\_ b. Last Name \_\_\_\_\_ c. Company \_\_\_\_\_

d. Mailing Address \_\_\_\_\_

e. City/Town \_\_\_\_\_ f. State \_\_\_\_\_ g. Zip Code \_\_\_\_\_

h. Phone Number \_\_\_\_\_ i. Fax Number \_\_\_\_\_ j. Email address \_\_\_\_\_

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

a. First Name \_\_\_\_\_ b. Last Name \_\_\_\_\_ c. Company \_\_\_\_\_

d. Mailing Address \_\_\_\_\_

e. City/Town \_\_\_\_\_ f. State \_\_\_\_\_ g. Zip Code \_\_\_\_\_

h. Phone Number \_\_\_\_\_ i. Fax Number \_\_\_\_\_ j. Email address \_\_\_\_\_

**Note:**

**Note:** Before completing this form consult your local Conservation Commission regarding any municipal bylaw or ordinance.

5. Representative (if any):

a. Firm \_\_\_\_\_

b. Contact Person First Name \_\_\_\_\_ c. Contact Person Last Name \_\_\_\_\_

d. Mailing Address \_\_\_\_\_

e. City/Town \_\_\_\_\_ f. State \_\_\_\_\_ g. Zip Code \_\_\_\_\_

h. Phone Number \_\_\_\_\_ i. Fax Number \_\_\_\_\_ j. Email address \_\_\_\_\_

6. Total WPA Fee Paid (from attached ANRAD Wetland Fee Transmittal Form):

a. Total Fee Paid \_\_\_\_\_ b. State Fee Paid \_\_\_\_\_ c. City/Town Fee Paid \_\_\_\_\_

Fees will be calculated for online users.



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**B. Area(s) Delineated**

1. Bordering Vegetated Wetland (BVW) \_\_\_\_\_ Linear Feet of Boundary Delineated
2. Check all methods used to delineate the Bordering Vegetated Wetland (BVW) boundary:
  - a.  DEP BVW Field Data Form (attached)
  - b.  Other Methods for Determining the BVW boundary (attach documentation):
    1.  50% or more wetland indicator plants
    2.  Saturated/inundated conditions exist
    3.  Groundwater indicators
    4.  Direct observation
    5.  Hydric soil indicators
    6.  Credible evidence of conditions prior to disturbance
3. Indicate if any other resource area(s) are delineated:

a. Resource Area	b. Linear Feet Delineated
c. Resource Area	d. Linear Feet Delineated

**C. Additional Information**

Applicants must include the following plans with this Abbreviated Notice of Resource Area Delineation. 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.  ANRAD (Delineation Plans only)
2.  Simplified Review ANRAD with Stormwater (Delineation Plans and Project Plans)
3.  Simplified Review ANRAD without Stormwater (Delineation Plans only)
4.  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.)
5.  Plans identifying the boundaries of the Bordering Vegetated Wetlands (BVW) (and other resource areas, if applicable).
6.  List the titles and final revision dates for all plans and other materials submitted with this Abbreviated Notice of Resource Area Delineation.



**D. Simplified Review for Buffer Zone Projects**

Simplified Review cannot be applied to work proposed within riverfront areas or bordering land subject to flooding.

I certify that the project design and construction, in order to be eligible for Buffer Zone Simplified Review, complies with the following requirements.

**Boxes 1-10 must be checked in order for the application to be eligible.**

1.  No work of any kind will occur within any wetland resource areas including Riverfront Area and Bordering Land Subject to Flooding.
2.  The inner 0-to-50-foot wide area from the delineated wetland boundary will not be disturbed by any work associated with this project, including placement of any stormwater management components.
3.  The buffer zone where the work is proposed does not border an Outstanding Resource Water (e.g., certified vernal pool, public water supply reservoir or tributary), as defined in 314 CMR 4.00 or border coastal resource areas at 310 CMR 10.25-10.35.
4.  The buffer zone is not adjacent to wetland resources with estimated wildlife habitat (which is identified on the most recent Estimated Habitat Map of State-listed Rare Wetlands Wildlife).
5.  If the project is subject to the Massachusetts Stormwater Policy, all work will be conducted in conformance with an approved Stormwater Management Plan.
6.  Erosion and Sedimentation controls will be provided at the 50-foot buffer zone line or limit of work (whichever is a greater distance from the resource area) and be sufficient to protect resource areas during construction.
7.  The buffer zone does not contain an existing slope greater than an average of 15% at its steepest gradient across the 100-foot width of the buffer zone from the edge of the resource area to the outer edge of the buffer zone.
8.  Following completion of the project, the amount of new impervious surface, in combination with existing impervious surfaces, will not exceed 40% of the buffer zone between 50 and 100 feet from a delineated boundary.
9.  If work authorized under Simplified Review is commenced, no work is allowed, and no additional NOI or RDA may be filed, for any work within the 0-to-50-foot buffer zone during the term of an ORAD associated with this application. If work authorized under Simplified Review is **not** commenced, then future NOIs or RDAs may be filed for work within the 0-to-50-foot portion of the buffer zone.
10. The project a.  is b.  is not subject to the Massachusetts Stormwater Policy.

If the project is subject to the Stormwater Policy, check one of the following three boxes:

1.  attached is a Stormwater Management Form (and supporting information)
2.  no work contemplated at this time; a Stormwater Management Form (and supporting information) will be provided to the Conservation Commission for review and concurrence prior to the commencement of any work on the site.
3.  Stormwater Management Form is being submitted for a previously issued Order of Resource Area Delineation (delineation only) dated: \_\_\_\_\_ a. Date

\_\_\_\_\_ b. Title of Stormwater Management Plan

\_\_\_\_\_ c. Date

\_\_\_\_\_ d. Signature of Applicant or Applicant's Representative



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**E. Fees**

The fees for work proposed under each Abbreviated Notice of Resource Area Delineation must be calculated and submitted to the Conservation Commission and the Department (see Instructions and Wetland Fee Transmittal Form).

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 the attached Wetland Fee Transmittal Form) to confirm fee payment:

1. Municipal Check Number

2. Check date

3. State Check Number

4. Check date

5. Payor name on check: First Name

6. Payor name on check: Last Name



## F. Signatures and Certification Requirements

I certify under the penalties of perjury that the foregoing Abbreviated Notice of Resource Area Delineation 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 certify that any work associated with the proposed project meets all of the eligibility criteria listed in Section D above.** If the project does not comply with the Section D eligibility requirements, or if I decide to not do the work allowed by the Simplified Review Approval, I will file a Notice of Intent or Request for Determination of Applicability for any proposed future work as required by the Conservation Commission.

I acknowledge that I am responsible for promptly requesting a Certificate of Compliance following completion of any work allowed pursuant to a Simplified Review or no later than three years from the date of the Order of Resource Area Delineation unless the Order is extended on Wetland Form 7, Extension Permit for Order of Conditions.

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 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.

I hereby grant permission, to the Agent or member of the Conservation Commission and the Department of Environmental Protection, to enter and inspect the area subject to this Notice at reasonable hours to evaluate the project subject to this Notice, and to require the submittal of any data deemed necessary by the Conservation Commission or Department for that evaluation.

I acknowledge that failure to comply with these certification requirements is grounds for the Conservation Commission or the Department to take enforcement action.

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 Abbreviated Notice of Resource Area Delineation (Form 4A), including supporting plans and documents; two copies of the ANRAD Wetland Fee Transmittal Form; and the city/town fee payment must be sent to the Conservation Commission by certified mail or hand delivery.

### For DEP:

One copy of the completed Abbreviated Notice of Resource Area Delineation (Form 4A), including supporting plans and documents; one copy of the ANRAD Wetland Fee Transmittal Form; and a copy of the state fee payment must be sent to the DEP Regional Office (see Instructions) by certified mail or hand delivery. (E-filers may submit these electronically.)

### Other:

If the applicant has checked the “yes” box in any part of Section C, 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.



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Bureau of Resource Protection - Wetlands

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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. Applicant:

a. First Name	b. Last Name	c. Company
d. Mailing Address		
e. City/Town	f. State	g. Zip Code
h. Phone Number		

2. Property Owner (if different):

a. First Name	b. Last Name	c. Company
d. Mailing Address		
e. City/Town	f. State	g. Zip Code
h. Phone Number		

3. Project Location:

a. Street Address	b. City/Town
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**B. Fees**

The fee is calculated as follows for each Resource Area Delineation included in the ANRAD (check applicable project type):

Bordering Vegetated Wetland:

1. <input type="checkbox"/> single family house project	a. linear feet	x \$2.00 =	b. Total fee not to exceed \$200
2. <input type="checkbox"/> all other projects	a. linear feet	x \$2.00 =	b. Total fee not to exceed \$2,000

Other Resource Area (e.g., bank, riverfront area, etc.):

3. <input type="checkbox"/> single family house project	a. linear feet	x \$2.00 =	b. Total fee not to exceed \$200
4. <input type="checkbox"/> all other projects	a. linear feet	x \$2.00 =	b. Total fee not to exceed \$2,000

State share of filing fee: 5. 1/2 of total fee **less** \$12.50

City/Town share of filing fee: 6. 1/2 of total fee **plus** \$12.50



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**C. Submittal Requirements**

- a.) Send a copy of this form, with a check or money order for the state share of the fee, payable to the Commonwealth of Massachusetts, to:

Department of Environmental Protection  
Box 4062  
Boston, MA 02211

- b.) **To the Conservation Commission:** Send the Abbreviated Notice of Resource Area Delineation; a **copy** of this form; and the city/town fee payment.
- c.) **To DEP Regional Office** (see Instructions): Send one copy of the Abbreviated Notice of Resource Area Delineation (and any additional documentation required as part of a Simplified Review Buffer Zone Project); a **copy** of this form; and a **copy** of the state fee payment. (E-filers of Notices of Intent may submit these electronically.)