



MASSWILDLIFE

# MASSACHUSETTS PROJECT REVIEW CHECKLIST

*Massachusetts Endangered Species Act M.G.L. c.131A and Regulations (321 CMR 10.00)*

### Project Details

\*Project or Site Name: \_\_\_\_\_

\*Street Address/Location: \_\_\_\_\_

\*Town(s): \_\_\_\_\_

\*Total Site Acreage: \_\_\_\_\_

\*Acreage of Disturbance<sup>1</sup>: \_\_\_\_\_

Parcel/lot number: \_\_\_\_\_

Assessors map/plat number: \_\_\_\_\_

Project Description (If necessary, a project/site description can also be provided as an attachment): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Registry of deeds information<sup>2</sup>

Registry: \_\_\_\_\_

Certificate # (if registered land): \_\_\_\_\_

Book: \_\_\_\_\_

Page Number: \_\_\_\_\_

Do you have a previous NHESP Tracking number? (Yes / No) If yes, please provide: \_\_\_\_\_

Will this project require a filing with the Conservation Commission and/or DEP pursuant to the Wetlands Protection Act (WPA)? (Yes / No)

### Map

\*Required: Enclose a map with the site location clearly marked and centered on the page.

### Landowner Info

\*Are you the Record Owner<sup>3</sup> of the property? (Yes / No)

\*If No, are you a representative of the Record Owner or do you have permission from the Record Owner to submit this request or filing?<sup>4</sup> (Yes / No)

\*Landowner Name \_\_\_\_\_ Organization (if applicable) \_\_\_\_\_

\*Street Address/Location \_\_\_\_\_ \*City/Town \_\_\_\_\_ \*State \_\_\_\_\_ \*Zip Code \_\_\_\_\_

Email \_\_\_\_\_ Telephone \_\_\_\_\_

Comments/Purpose of request<sup>5</sup>: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>1</sup> Please disclose the full acreage of disturbance associated with the project, including areas outside of Priority Habitat.

<sup>2</sup> If your project contains more than one registered property, please attach a document listing the Registry information for each.

<sup>3</sup> Record Owner means any person or entity holding a legal or equitable interest, right or title to real property, as reflected in a written instrument or recorded deed, or any person authorized in writing by such person.

<sup>4</sup> If you are not the record owner, a statement or proof that you are authorized by the record owner must be attached.

<sup>5</sup> Provide the authorization you have to submit this request if you are not the record owner and not a representative of the record owner.

Applicant Info

<b>Applicant Name</b> (if different from Landowner)		<b>Organization</b> (if applicable)	
<b>Street Address/Location</b>	<b>City/Town</b>	<b>State</b>	<b>Zip Code</b>
<b>Email</b> (if available)		<b>Telephone</b>	

Representative Info

<b>Representative Name</b> (if different from Landowner)		<b>Organization</b> (if applicable)	
<b>Street Address/Location</b>	<b>City/Town</b>	<b>State</b>	<b>Zip Code</b>
<b>Email</b> (if available)		<b>Telephone</b>	

\*Required Documents

- USGS map (1:24,000 or 1:25,000) with property boundary clearly outlined
  - Project plans for entire site (including wetland Resource Areas, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work)
  - Assessor's map or right-of-way plan of site
  - Statement/proof that applicant is the Record Owner or that applicant is a person authorized in writing by the record owner to submit this filing
  - Photographs representative of the site
- Projects altering 10 or more acres, must also submit:
- A vegetation cover type map of the site
  - Project plans showing Priority Habitat boundaries

The Division will notify you within 30 days if the materials submitted do not satisfy the filing requirements under 321 CMR 10.20. The Division may request additional information, such as, but not limited to, species and habitat surveys. A request for additional information would come within 30 days of receiving a complete filing.

\*Filing Fee

Fee schedule is available at <https://www.mass.gov/how-to/how-to-file-for-a-mesa-project-review>

**\*Total MESA Fee Enclosed:** \_\_\_\_\_ Payable via check to **Comm. of MA - NHESP**

\*Required Signatures

I hereby certify under the pains and penalties of perjury that the information contained is true and complete to the best of my knowledge.

Signature of Property Owner/Record Owner of Property	Date
Signature of Applicant (if different from Owner)	Date

Please mail this completed form, with the required document and fee to:  
*NHESP Regulatory Review | MassWildlife Field Headquarters | 1 Rabbit Hill Road | Westborough, MA 01581*