

Town of Barnstable Conservation Commission

230 South Street Hyannis Massachusetts 02601 Form M FRESH WATER

Office: 508-862-4093

E-mail: conservation@town.barnstable.ma.us

Fresh Water Pier Maintenance Form for Contractors

SE3	Original Applicant's Name:	

Project Location _____ Map: ____ Parcel: _____

Requirements for Maintenance of Seasonal Piers

As a pier contractor doing business within the Town of Barnstable, you are expected to comply with the following requirements for maintenance of docks or piers and their associated structures. Please complete and return to the Conservation office prior to work.

When considering maintenances .

When c	considering maint	enance	work:	
	Your customer's	name:		
	Verify that a Certificate of Compliance was issued for the structure. If no Certificate exists, <u>no</u> maintenance may be performed.			
	Review the most recently approved pier plan. To be sure, back-check with the approved plan date in the Order of Conditions and any subsequent revisions. Notify Conservation Program staff of any deviations between the approved plan and the existing structure.			
If the a	bove conditions a	re satisf	ïed, move on to	
	Provide the Conservation Program with an accurate start-up date for your maintenance work. Date:			
	Comply with all conditions in the Order of Conditions and Certificate of Compliance.			
	Comply with the approved plan. Remember: Where as-built pier footprints are in conflict with the approved plan or special conditions, approved plans and conditions shall govern.			
	Of special note:	A. B. C. D. E. F.	No creosote-treated wood allowed; CCA-treated wood only for structural timber Pilings driven; jetting only for initial pilot hole Deck plank spacing at least 3/4". Grated decking to be replaced in-kind. No lead caps on pilings The DEP permit number and street address (at least) shall be permanently and conspicuously placed on the dock so as to be visible from seaward. Conversion of wood to aluminum piers require prior staff approval	
Please	call us at 508-862-		r assistance in permit verification. Thank you for your cooperation.	

Your Business Name

Contractor's Signature

Phone Number

Date