

CITY OF NEW BEDFORD MASSACHUSETTS

APPLICATION FOR CONSTRUCTION OF PAVED SIDEWALK/DRIVEWAY

ENGINEERING - 508-979-1526

Owner	Property Owner	C	Supervising Civil Engineer
00	PAID: 150.		
ist accompany this application. Contractor to call 24 hrs. in advance for pre-inspection (prior to pouring) If curbing is removed, it must be returned within 24 hrs to the D.P.I. Yard 1105 Shawmut Ave., New Bedford	ist accompany this application. Contractor to call 24 hrs. in advance for pre-inspecti If curbing is removed, it must be returned within 24 1105 Shawmut Ave., New Bedford	must accompany th Contractor to ca If curbing is ren 1105 Shawmut A	Permit/Inspection fee of \$150.00 must accompany this application. Contractor to call 24 hrs. in accompany this application. Contractor to call 24 hrs. in accompany this application. Contractor to call 24 hrs. in accompany this application. Contractor to call 24 hrs. in accompany this application. Contractor to call 24 hrs. in accompany this application. Contractor to call 24 hrs. in accompany this application. Contractor to call 24 hrs. in accompany this application.
1	felire	Manny	
4/17/13 Date	ovedRejected _	√ Approved	Engineering Department
S	Signature	Darry Si	
# <u>B-13-67</u> 5	Approved (New Building) Approved - Bldg. Permit#_ _ Rejected		Building Dept.
	Signature	S	NIA
Date	Rejected	Approved_	Traffic Commission:
8 7840735	Tel: 578	Asphait	Bonded Contractor: RED
is Concrete $\frac{12'\times13'}{}$	Bituminous Concrete		
OVAL	Curo Kemovai		Caro Needed
Relocation/Widening	Relocation		Concrete Riblbon
	Commercial		Concrete Full Width
Existra 10, x 13, 0	Residential		Bituminous Concrete
Driveway Width (ft)	Driv	Dimensions	Sideyvalk
0	ances of the City of New Be	rein, and the Ordin	terms and conditions set forth herein, and the Ordinances of the City of New Bedford.
driveway / sidewalk located a, lot $3\ell \ell$ in accordance with the	plot 130	sts permission to con	The above hereby requests permission to construct a paved:
state zip code	city		street
MC 62745	New Beached 1	rne st	Address: 1021 Shelburne
Tel:	Margres) / Maria 1	Property Owner: Adelino
//3	Date: 5/1/		Application No. 10,981
Expires: 6/1/2014	E		

Property Owner's Representative



CITY OF NEW BEDFORD

D.P.I. -Engineering Division 1105 Shawmut Ave.

New Bedford, Ma. 02746

Tel: 508-991-6150

Hax: 508-991-6152

Ronald Labelle
Commissioner
Duarte M. Andrade
Acting City Engineer

476 Hixuille (Mailing Address)	Plot Lot	(Name)	m/ aprilad/m	To Whom It May Concern:
(Mailing Address) Cd. Dart, to act on my behalf including affixing my	, hereby agree to allow Reis As Dha	Owner of property located at 107 SMI (Mailing Address)	IND/MANO MARQUES, beir	

Signes

I further agree to conform to, and abide by, All City rules and ask regulations applicable to

各種的 医神经性 经转换的复数形式

Driveway Installation Permits Sidewalk Installation Permits

Water Service Permits

Sewer/Drain Service Permits

the permit (s) being applied for:

signature in securing permit for:



Commonwealth of Massachusetts

CITY OF NEW BEDFORD

City Hall, Room 308, 133 William Street New Bedford, MA 02740 (508) 979-1540



No. <u>B-13-675</u>

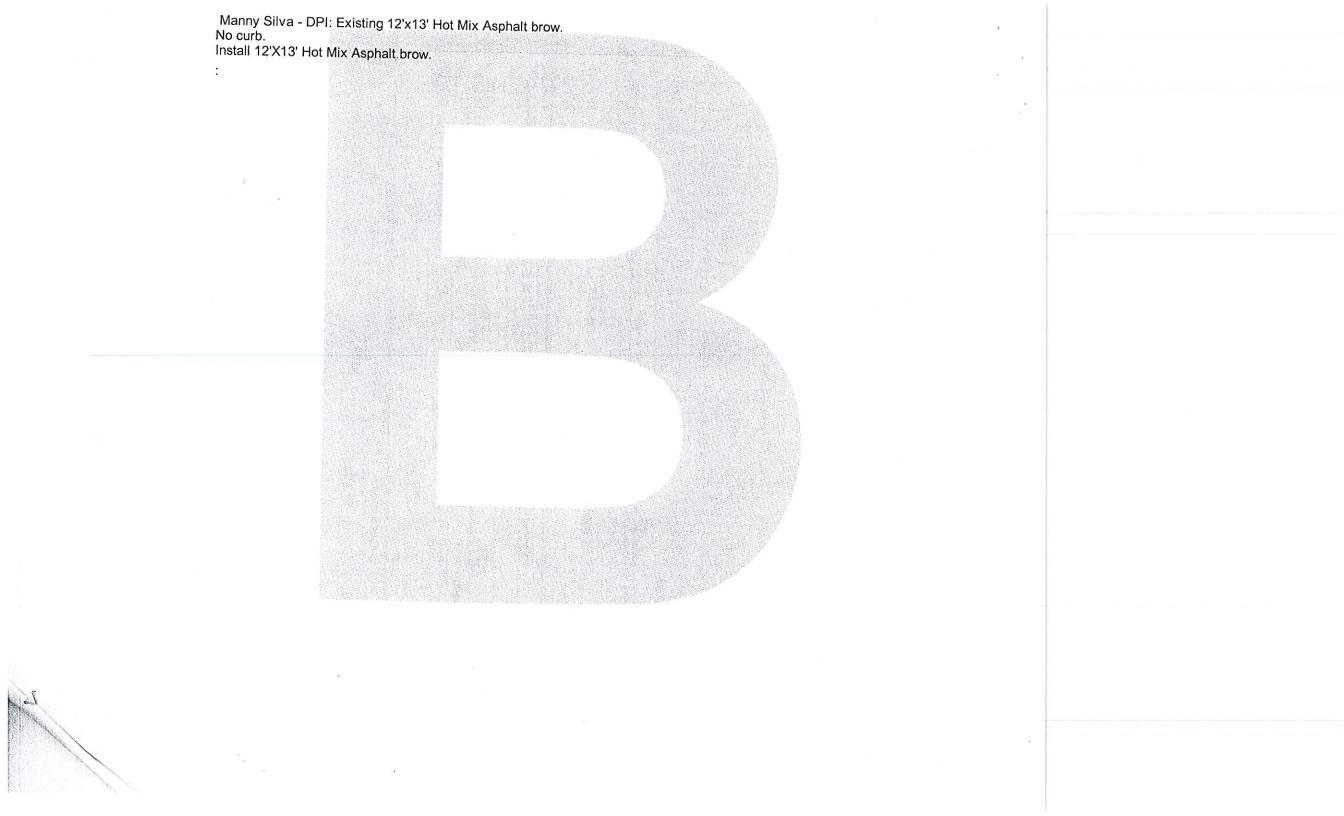
BUILDING PERMIT

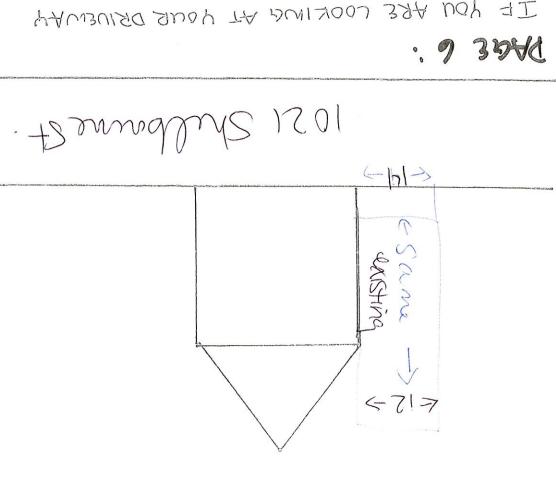
MSBC Sect. 110.14 - Any permit issued shall be deemed abandoned and invalid unless the work authorized by it shall have been commected within six (6) months after its issuance.

4/30/2013

FEE PAID: \$30.00

This certifies that KRISTAL RE	EIS	Contractor Lie 4	105007	ParceIID 130-386
owner/contractor has permis	The state of the s	Contractor Lic. #	103097	-
on: 1021 SHELBUR	INE ST			
Providing that the person accepting provisions of the statute of the Comeraising, moving, reparing, or tearing		onfrom to the terms of applicatio City of New Bedford relating to th	n therefore on file in e inspection, erectio	this office; to the on, enlarging, altering,
Permit is	s issued subject to the following speci	al requirements: (Restrictions)		
CITY DEPARTMENT/COMMISSION C	OMMENTS	BUILDING DEPARTM	MENT COMMENTS	
Department.Commission:				
YOUR AREA	INSPECTOR IS: The W. L.			
YOUR AREA	INSPECTOR IS: Thomas Welch		Tel. (508) 979-1540	Between 8:00am - 9:00am
YOUR AREA NOTICE: NOTIFY INSPECTO ADVANCE OF APPLYING S	OR 48 HOURS IN	OCCUPANCY PERMIT R Building or Structure shall be used or occupier the Building Commissioner - MSBC, Sect. 120	EQUIRED BEF	ORE OCCUPANCY
NOTICE: NOTIFY INSPECTO ADVANCE OF APPLYING S	OR 48 HOURS IN HEATHING OR LATHING by	Building or Structure shall be used or occupied the Building Commissioner - MSBC, Sect. 120	EQUIRED BEF I until the Certificate of Use a	ORE OCCUPANCY and Occupancy shall have been issued
NOTICE: NOTIFY INSPECTOR ADVANCE OF APPLYING S This Card Must Be Displa	OR 48 HOURS IN HEATHING OR LATHING by ayed in a Conspicuous Place on the	Building or Structure shall be used or occupied the Building Commissioner - MSBC, Sect. 120	EQUIRED BEF I until the Certificate of Use a	ORE OCCUPANCY and Occupancy shall have been issued





PAUSUISO SUOY TA PUNILLONS AT YOUR DRIVEWARY
3HT TO 3012 HILLY STREET, WHICH SIDE DE THE
5WOMPHONSE IS THE DEWENDAY ON ?

43012 LONG X UM 32A19 32A31924

Manuel Silva

From: Sent: To:

Subject:

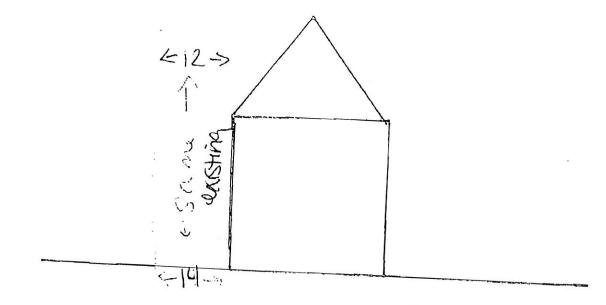
Maria Sequeira Tuesday, April 16, 2013 3:09 PM Maria Pina-Rocha; Michelle.Avila-Silva@newbedford-ma.gov; Manuel Silva; Raymond A. Khalife; Ana S. Rosa; Donna M. Amado; Manuel Silva; Manuel Silva Permit/Application: TB-13-675 at 1021 SHELBURNE ST for Driveways - 30.00

Thank you for your attention in this matter. Please review permit # in the View Permit System. The paper work will be forwarded to you via interoffice mail.

Maria Sequeira

Department of Inspectional Services

12' X13' Hot mix Asphalt brow 12 X 12 Hot hix 4/17/13/ 1021 Shelburn St. Del 2 Adelino Marque 9867



1021 Shelbourne St.

PAGE 6:

IF YOU ARE LOOKING AT YOUR DRIVEWAY
FROM THE STREET, WHICH SIDE DF THE
HOUSE IS THE DRIVEWAY ON?
APPEASE PLACE AN X ON that SIDE A



Ronald Labelle Commissioner

Duarte M. Andrade Acting City Engineer

CITY OF NEW BEDFORD

WASSACHUSETTS

D.P.I. -Engineering Division 1105 Shawmut Ave. New Bedford, Ma. 02746 Tel: 508-991-6150 Fax: 508-991-6152

sign on X	Se						0 × 0	
8	N	I further agree to conform to, and the permit (9) being applied for:	11	signature in	HOLY	Owner of p	I	
	Name	e to conform being applied		signature in securing permit for:	XUI (roperty locat	dias/h	/ Concern
102			Wat Driv Side	nit for:	Maling Address On to act on my behalf including afficient	Owner of property located at 1021 Shill Continue	Delino/mara Maraus	efn:
021 Shell bill in no St		by, All City	Sewer/Drain Service Permits Water Service Permits Driveway Installation Permits Sidewalk Installation Permits		Name to act on my behalf	1 Shel	Mac	
Dillo Mo	Charles .	Il City rules and ask regulations ap	vice Permits rmits tion Permits tion Permits	Television of the control of the con	low Sell	Samo		u.f.
7		regulations a			f including	CST		
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p.b

508-993-0362

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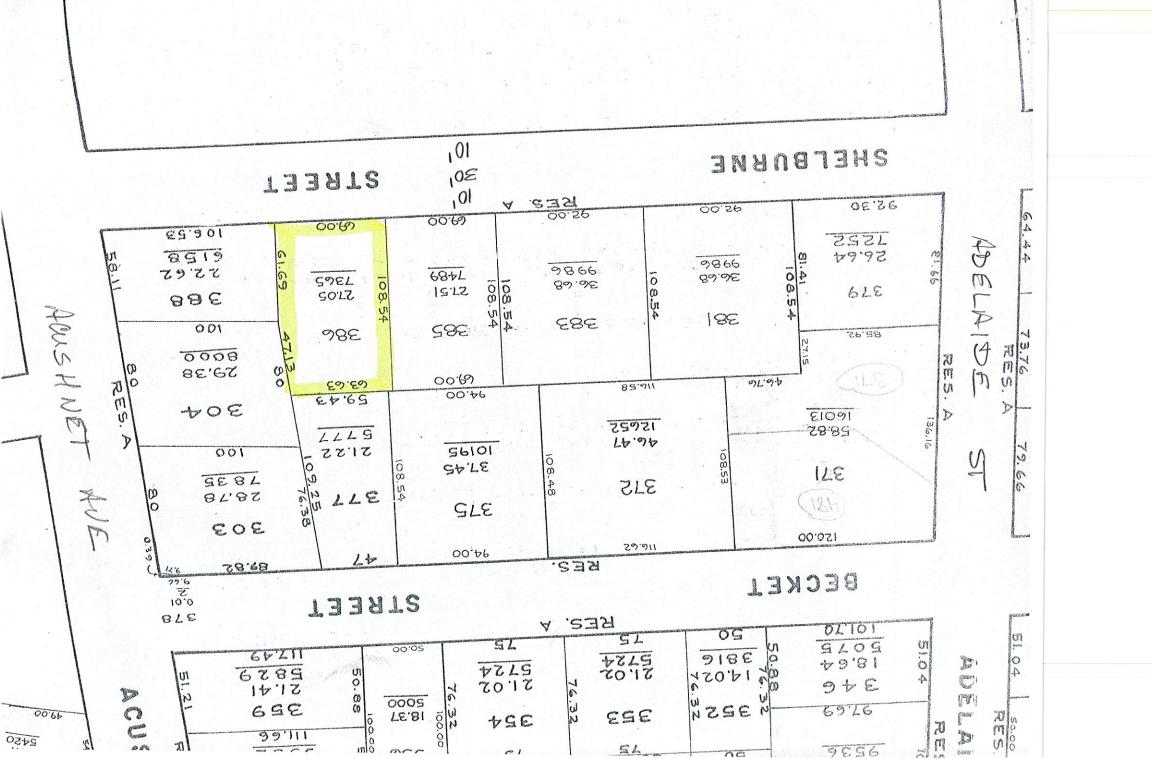
83-28-13 11:26 FROM-

076-1 TANA/TANAA G/G-1

The Common wealth of Massachusetts Department of Industrial Accidents	atta
Boston, MA 02111 www.mass.gov/dia	Maure
Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers Applicant Information Please Print Legible	ors/Electricians/Plumbers Please Print Lepibly
Name (Business/Organization/Individual): RUS ASSMOLL	TALL STREET
e Rd.	
City/State/Zip: Der Angusth 14 Cot of 1508.	9360735
eck the appropriate b	Type of project (required):
employer with 4. 1 and a general contractor and I have hired the sub-contractors	6. New construction
ner-	7. Remodeling
working for me in any capacity. **The complete and have workers and have workers and have workers.	
[No workers' comp. insurance comp. insurance. ² S. We are a corporation and its	10. Electrical repairs or additions
work	11. Plumbing repairs or additions
insurance required.] † c. 152, §1(4), and we have no	12. Roof repairs
comp. insurance required.]	
Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information. Yomeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such Contractors that check this box must attached an additional sheet showing the name of the sub-contractors and state whether or not those entities have imployed. If the sub-contractors have employed, they must provide their workers' comp. policy number.	licy information. Ist submit a new affidavit indicating such. State whether or not those entities have
am an employer that is providing workers' compensation insurance for my employees. If ormation. Isorance Company Name: PON OSS TOS.	. Below is the policy and job site
olicy # or Self-ins. Lic. #: WC 8884937 Expiration Date:	on Date: 1/1/2014
ob Site Address: 'O O CALTY OT City/State/Zip: MS MAOLT (stach a copy of the workers' compensaw., policy declaration page (showing the policy number and expiration date).	Sizip: 1015 MAOUTH (
allure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a ne up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine f up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of svestigations of the DIA for insurance coverage verification.	mposition of criminal penalties of a of a STOP WORK ORDER and a fine be forwarded to the Office of
ignature: Under the pains and penalties of perjury that the information provided above is true and correct parameter.	2 above is true and correct.
hone #: $508-990-01)55$ Official use only. Do not write in this area, to be completed by city or town official.	
City or Town: Permit/License #	
Issuing Authority (circle one): 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Ins	4. Electrical Inspector 5. Plumbing Inspector
Contact Person:	

Permit Log Report

Comment Date					risting 12'x13' Hot Mix o curb. stall 12'X13' Hot Mix A
			Comments		
Engineering>Pending	4/16/2013	BuibliuB	279-£1-8T	DOMOLAGY	
Engineering>Approved	4/17/2013	Building		beweiveA	sm142s
Slistal	Date		379-61-8T	Reviewed	s411mhs
	2,50	Permit Type	NId	Туре	Изте





CITY OF NEW BEDFORD

SIDEWALK/DRIVEWAY CONSTRUCTION OF APPLICATION FOR PAVED

ENGINEERING - 508-979-1526 MASSACHUSETTS

zip code	state	city	street
34629	Ma	New De about	Address: 1021 Shelburne St
	Tel:	Margres	Property Owner: Aclehno / Maria Marque
	Date: 5/1/13	Date:	Application No. 10,981
6/1/2014	Expires: 6		

The above hereby requests permission to construct a paved:

160

Shelbum st

plot

130

, lot 386

in accordance with the

sidewalk located at

driveway/

Permit/Inspection fee of \$150.00 must accompany this application terms and conditions set forth herein, and the Ordinances of the City of New Bedford. SPECIAL REQUIREMENTS: **Engineering Department Bonded Contractor:** Building Dept. Traffic Commission: Curb Needed Concrete Riblbon Concrete Full Width Bituminous Concrete Sidevvalk BE13 Hohalf If curbing is removed, it must be returned within 24 hrs to the D.P.I. Yard 1105 Shawmut Ave., New Contractor to call 24 hrs. in advance for pre-inspection (prior to pouring) Dimensions Approved Approved Signature Signature Signature Rejected Approved (New Building) Approved -X Rejected Bedford grown mo PAID: Tel: Bldg. Permit# Residential Rejected Bituminous Concrete Relocation/Widening Commercial Concrete Curb Removal 05/ S 888 Driveway B 4/17/13 186 B 7/3 luyruz -67 073 Date 2 12' x 13' asphalt £1x, Width (ft) mand

BY: Cheryl Supervising Civil Engineer (ound) They derse Mas S

Property Owner

Property Owner's Representative

Manuel Silva

From: Sent: To:

Subject:

Maria Sequeira Tuesday, April 16, 2013 3:09 PM Maria Pina-Rocha; Michelle.Avila-Silva@newbedford-ma.gov; Manuel Silva; Raymond A. Khalife; Ana S. Rosa; Donna M. Amado; Manuel Silva; Manuel Silva Permit/Application: TB-13-675 at 1021 SHELBURNE ST for Driveways - 30.00

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Department of Inspectional Services

P 130 Adelino Margn 98E7

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FUND HAMBUSO 3HT 2I 32NOH FROM THE STREET, WHICH SIDE DE THE TE YOU ARE LOOKING AT YOUR DRIVEWAY · 9 354d 1051 Shilbourd Ft. 6 pl > Sans

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