



CITY OF NEW BEDFORD

MASSACHUSETTS

APPLICATION FOR
CONSTRUCTION OF
PAVED
SIDEWALK/ DRIVEWAY

ENGINEERING - 508-979-1550

EXT. 506

Application No. 11,064

Expires: 3/18/15
Date: 3/18/14

Property Owner: Luis Marcial Tel: 646-382-6811

Address: 194 Boney St NE MA 02445
street city state zip code

The above hereby requests permission to construct a paved: ☒ driveway / ☒ sidewalk located at
194 Boney Street, plot 30, lot 193, in accordance with the
terms and conditions set forth herein, and the Ordinances of the City of New Bedford.

Sidewalk	Dimensions	Driveway	Width (ft)
Bituminous Concrete	☒ Residential		
Concrete Full Width	Commercial		
Concrete Ribbon	Relocation/Widening		
Curb Needed	☒ Curb Removal	☒ 15' granite curb	
	☒ Concrete	install 15'x10' cement	
	Bituminous Concrete	concrete drive	

Bonded Contractor: Magado Co. Tel: (508) 997-1022

Traffic Commission: _____ Approved _____ Rejected _____ Date _____
Signature _____

Building Dept. _____ Approved (New Building) _____
Approved - Bldg. Permit# B-14-22
Rejected _____

Signature Danny Fernandovich of C.T.

Engineering Department _____ Approved ☒ Rejected _____ Date 4/21/14
Signature Manny Silva C.T.

Permit/Inspection fee of \$150.00 must accompany this application.

SPECIAL REQUIREMENTS:
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

PAID: \$150.00

Manny Silva Supervising Civil Engineer

Property Owner

BY: Chereli Torres X. Frank Magado



Commonwealth of Massachusetts

CITY OF NEW BEDFORD

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

BUILDING PERMIT

No. B-14-22

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

This certifies that **ADRIAN MORGADO**

Contractor Lic. # _____

owner/contractor has permission to: Driveways - 30.00

on: 194 BONNEY ST

Providing that the person accepting this permit shall in every respect conform to the terms of application therefore on file in this office; to the provisions of the statute of the Commonwealth and to the by-laws of the City of New Bedford relating to the inspection, erection, enlarging, altering, raising, moving, repairing, or tearing down of a building.

Permit is issued subject to the following special requirements: (Restrictions)

CITY DEPARTMENT/COMMISSION COMMENTS

BUILDING DEPARTMENT COMMENTS

The following department/commission has expressed concern about the issuance of this permit. You are advised to contact that agency and resolve this matter.

PERMIT IS FOR: installing new driveway
10% rule applies to this driveway property under 5000sq' measured
property lines of 2 blds, markers present. 16' measured minus 1'6"=14' 6"

A 1' 6" BUFFER WILL BE REQUIRED BETWEEN THE SOUTH
ABUTTERS PROPERTY AND THE APPLICANTS PROPERTY

YOUR AREA INSPECTOR IS: **James E. Berube**

Tel. (508) 979-1540 Between 8:00am - 9:00am

OCCUPANCY PERMIT REQUIRED BEFORE OCCUPANCY

NOTICE: NOTIFY INSPECTOR 48 HOURS IN ADVANCE OF APPLYING SHEATHING OR LATHING

No Building or Structure shall be used or occupied until the Certificate of Use and Occupancy shall have been issued
by the Building Commissioner - MSBC, Sect. 120.1

This Card Must Be Displayed in a Conspicuous Place on the Premises and Not Torn Down or Removed Until Completion of Work

SUBJECT TO MASSACHUSETTS
STATE BUILDING CODE

Building Commissioner

James E. Berube

Plan Review Comments: _____

Manny Silva - DPL: Remove 15' Granite curb.
Install 15'x10' Cement Concrete brow.



3/18/2014

FEE PAID: \$30.00

ParcelID 30-193

Manuel Silva

From: Maria Sequeira
Sent: Tuesday, January 14, 2014 12:04 PM
To: Maria Pina-Rocha; Manuel Silva; Ana S. Rosa; Donna M. Amado
Subject: Permit/Application: TB-14-22 at 194 BONNEY ST for Driveways - 30.00

Please review the permit in the subject line above in the View Permit System. The paper work you need is attached to the application.

Thank you for your attention in this matter.
Maria Sequeira
Department of Inspectional Services

194 Bonney St.
Luis Marciel
P30
h193

* Remove 15' Granite curb
Install 15'x10' cement concrete curb

Manuel H. Silva SPI-ENG 1/21/14

194 Bonney St, New Bedford, MA - Google Maps

Page 1 of 1

Google

To see all the details that are visible on the screen, use the "Print" link next to the map.







337	0857	57	8.25
15.37	9.7	10.61	
4185	26.41	2882	
93	33.0	60.0	

RES. C

62	14.73	14.97	15.01
7.88	40.10	40.48	40.86
21.45			
44	44	44	44

RES. C

13.16	8.2	8.3
35.82	12.32	9.12
81	23.54	24.85
1316		
35.82	42.3	42.8
90		

RES. C

THOMPSON

RES. C

46.5	46.5	46.5	46.5
156	157	158	159
15.37	15.37	15.37	15.37
4185	4185	4185	4185
93	93	93	93

RES. C

160	161	162	163
1707	15.37	15.37	15.37
4627	4185	4185	4185
93	93	93	93

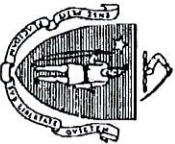
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RES. C

ORCHARD

BUS.

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The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, MA 02111
www.mass.gov/dia

Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers
Applicant Information Please Print Legibly

Name (Business/Organization/Individual): Margado Company Inc.

Address: 1 Anne's Path

City/State/Zip: Lakeville MA 02349 Phone #: 508-997-1022

Are you an employer? Check the appropriate box:

1. ☒ I am an employer with _____ employees (full and/or part-time).*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
3. ☐ I am a homeowner doing all work myself. [No workers' comp. insurance required.]†
4. ☐ I am a general contractor and I have hired the sub-contractors listed on the attached sheet. These sub-contractors have employees and have workers' comp. insurance.†
5. ☐ We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. [No workers' comp. insurance required.]

Type of project (required):

6. ☐ New construction
7. ☐ Remodeling
8. ☐ Demolition
9. ☐ Building addition
10. ☐ Electrical repairs or additions
11. ☐ Plumbing repairs or additions
12. ☐ Roof repairs
13. ☐ Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

† Homeowners 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 employees. If the sub-contractors have employees, they must provide their workers' comp. policy number.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.

Insurance Company Name: Travler's Insurance

Policy # or Self-ins. Lic. #: KUB-04B9NH66 Expiration Date: May 2014

Job Site Address: 194 Bonney St. City/State/Zip: New Bedford MA 02740

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date). Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine 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 of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature: John Margado Date: Jan 9, 2014

Phone #: 508-997-1022

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 Inspector 5. Plumbing Inspector

6. Other _____

Contact Person: _____ Phone #: _____

Magnum

Salut

Salut



Plot 30
193
107

10/10/03

TRASP. 1-10-14

L. v. R. Feld.

174 (Bernie) St. Mrs. Bobbitt

174 (Bernie) St. Mrs. Bobbitt

Permit Log Report

Details					
Name	Type	PIN	Permit Type	Date	
a411mhs	Reviewed	TB-14-22	Building	1/21/2014	Engineering-->Approved
a241jeb	Reviewed	TB-14-22	Building	1/15/2014	Bldg-Jlm Berube-->Pending
a241ms	Reviewed	TB-14-22	Building	1/14/2014	Engineering-->Pending
Comments					
Remove 15' Granite curb. Install 15'x10' Cement Concrete brow.				1/21/2014	



CITY OF NEW BEDFORD
Jonathan F. Mitchell, Mayor

Department of Public Infrastructure

Ronald H. Labelle
Commissioner

Water
Wastewater
Highways
Engineering
Cemetery

To Whom It May Concern:

I Jim's Regional 194 Bonney St, New Bedford, MA being
(Name) (Mailing Address)

Owner of property located at

Plot _____, Lot _____, hereby agree to allow Morgado Company Inc.
(Name)

1 Anne's Path Lakeville MA, to act on my behalf including affixing my
(Mailing Address)

signature in securing permit for:

- _____
Sewer/Drain Service Permits
- _____
Water Service Permits
- ☒
Driveway Installation Permits
- _____
Sidewalk Installation Permits

I further agree to conform to, and abide by, All City rules and ask regulations applicable to
the permit (s) being applied for:

Name [Signature]
(Signature)
184 Bonney St
(Address)
646-382-6511
(Telephone number)