CITY OF NEW BEDFORD
MASSACHUSETTS
ENGINEERING – 508-979-1550
EXT. 506

APPLICATION FOR CONSTRUCTION OF PAVED SIDEWALK/DRIVEWAY

Expires: 7-14-15

Application No. **11,085** Date: 7-14-14

Property Owner: Krystle CaBral Tel: 781-686-5444

Address: 231 Pleasant St. New Bedford MA 02745
street city state zip code

The above hereby requests permission to construct a paved: ✓ driveway / ✓ sidewalk located at 231 Pleasant Street:, plot 41, lot 110 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	16' granite curb.
			✓	Concrete	Install 16'x8' Cement concrete Bran
			___	Bituminous Concrete	

Bonded Contractor: Moragado company **Tel:** (508) 997-1022

Traffic Commission: _____ Approved _____ Rejected _____ Date

_____
Signature

Building Dept.

___ Approved (New Building)
✓ Approved - Bldg. Permit# B-14-790
___ Rejected

Danny Romanowicz C.T.
Signature

Engineering Department

✓ Approved _____ Rejected 5/21/14 Date

Manuel H. Silva C.T.
Signature

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

Manuel H. Silva
Supervising Civil Engineer

BY: Manuel Torres

Property Owner

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-14-790**

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

6/16/2014

FEE PAID: **$30.00**

ParcelID **41-110**

This certifies that ADRIAN MORGADO **Contractor Lic. #** _____

owner/contractor has permission to: Driveways - 30.00

on: 231 PLEASANT ST

Providing that the person accepting this permit shall in every respect confrom to the terms of application therefore on file in this office; to the provisions of the statute of the Comonwealth adn to the by-laws of the City of New Bedford relating to the inspection, erection, enlarging, altering, raising, moving, reparing, 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 adviced to contact that agency and resolve this matter. Department.Commission: _____	:

YOUR AREA INSPECTOR IS: **James E. Berube** Tel. (508) 979-1540 Between 8:00am - 9:00am

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

OCCUPANCY PERMIT REQUIRED BEFORE OCCUPANCY

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

Manny D. Bonanno

Building Commissioner

Plan Review Comments: Manny Silva - DPI: Remove 16' Granite curb.
Install 16'x8' Cement Concrete brow.

Sarah 508-997-1022

CITY OF NEW BEDFORD
Jonathan Mitchell, Mayor

Department of Public Infrastructure

Ronald H. Labelle
Commissioner

Water
Wastewater
Highways
Engineering
Cemeteries
Park Maintenance

To Whom It May Concern:

I Krystle Cabral **, being**
(Name) (Mailing Address)

Owner of property located at
231 Pleasant St New Bedford

Plot_____, Lot_____, hereby agree to allow Morado Company Inc.
(Name)

_____**, 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 Krystle Cabral
Signature

231 Pleasant St
Address

6/18/14 781-686-5444
Date Telephone number

1105 Shawmut Avenue, New Bedford, MA 02746 Telephone 508-979-1550 Fax 1-508-961-3054
RONALDL@NEWBEDFORD-MA.GOV

Manuel Silva

From: Maria Sequeira
Sent: Tuesday, May 20, 2014 3:47 PM
To: Maria Pina-Rocha; Manuel Silva; Ana S. Rosa; Donna M. Amado
Subject: Permit/Application: TB-14-790 at 231 PLEASANT 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

231 Pleasant St.
Krystal Cabral (New owner) / Antone Gomes
P41
L110

* Remove 16' Granite Curbs
Install 16' X 8' Cement concrete brow

818309571

10:10:19 a.m. 05-19-2014

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): Morgado Company Inc.

Address: 1 Annie's Path

City/State/Zip: Lakeville MA 02347 Phone #: 508-997-1022

Are you an employer? Check the appropriate box:

1. [x] I am a 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: Berkshire Hathaway Guard

Policy # or Self-ins. Lic. #: WBUC597920 Expiration Date: May 2015

Job Site Address: 231 Pleasant 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: _____ Date: May 16, 2014

Phone #: 508-997-1022

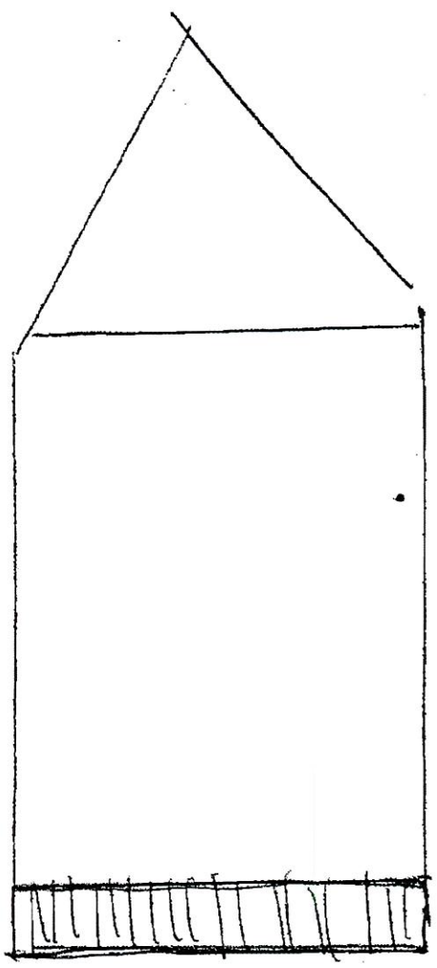
Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ **Permit/License #** _____

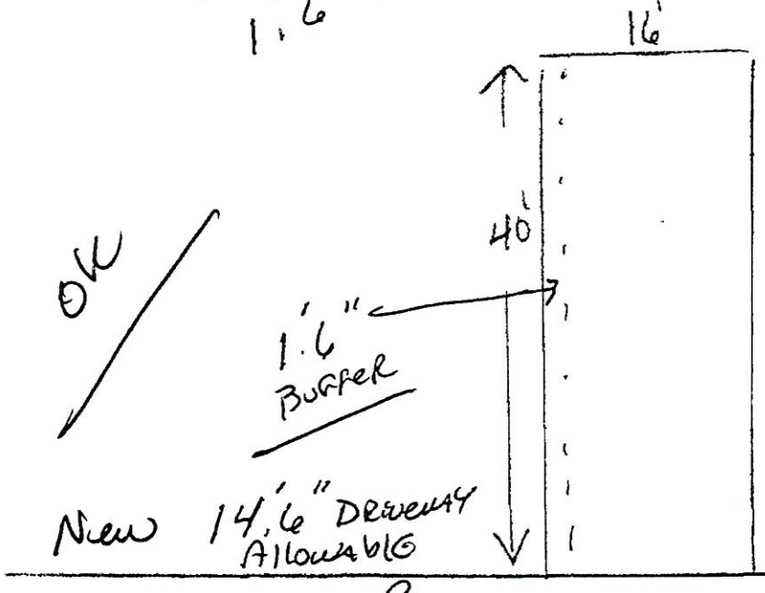
Issuing Authority (circle one):
1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector
6. Other _____

Contact Person: _____ **Phone #:** _____

Mirgado Co
Sara 508-9971022



Lot size
under 5000 sq
10% Rule Applies
35% Greenspace Applies
1.6" Buffer Required



JB
5-20-14

Permit Log Report

Name	Type	PIN	Permit Type	Date	Details
a411mhs	Reviewed	TB-14-790	Building	5/22/2014	Engineering-->Approved
a241ms	Reviewed	TB-14-790	Building	5/20/2014	Engineering-->Pending

Comments	Comment Date
Remove 16' Granite curb. Install 16'x8' Cement Concrete brow.	5/22/2014

PLEASANT ST

BUSINESS

STREET

RES. C

RES. B

BUSINESS

RES. C

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