CITY OF NEW BEDFORD
MASSACHUSETTS
ENGINEERING – 508-979-1550

APPLICATION FOR CONSTRUCTION OF PAVED SIDEWALK/DRIVEWAY

Expires: 7/8/17

Application No. 11264 Date: 7/8/16

Property Owner: Susan Monteiro Tel:

Address: 938 Geraldine st NB, MA
street city state zip code

The above hereby requests permission to construct a paved: ✓ driveway / _____ sidewalk located at 938 Geraldine ST, plot 120, lot 20 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		x	Residential	existing 18 x 10
____	Concrete Full Width		~~x~~	Commercial	
____	Concrete Ribbon		____	Relocation/Widening	
____	Curb Needed		____	Curb Removal	
			____	Concrete	
			x	Bituminous Concrete	Install 18 x 10

Bonded Contractor: Able Asphalt **Tel:**

Traffic Commission: _____ Approved _____ Rejected _____ Date

N/A _____
Signature

Building Dept.
_____ Approved (New Building)
x Approved - Bldg. Permit# B16 1120
_____ Rejected

Danny Bomanowicz
Signature

Engineering Department x Approved _____ Rejected 6/3/16 Date

Manuel Sa (MS)
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 Sa
Supervising Civil Engineer

BY: Mallory Sa

Property Owner

x

CITY OF NEW BEDFORD
MASSACHUSETTS
Engineering Department, Rm. 303
133 William Street
New Bedford, Ma. 02740
Tel: 508-979-1527
Fax: 508-961-3043

Duarte M. Andrade,
Acting City Engineer

To Whom It May Concern:

I Susan Monteiro (Name) 938 Geraldine St. (Mailing Address), being

Owner of property located at 938 Geraldine St.

Plot ____, Lot ____, hereby agree to allow Able Asphalt, Inc (Name).

128 Woodcock Rd. (Mailing Address), to act on my behalf including affixing my 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

938 Geraldine St. Address

5/19/14 Date

508 5420114 Telephone number

City of New Bedford, MA

Building Division

City Hall, Room 308, 133 William Street
New Bedford, MA 02740

RECEIPT

APPLICATION TO CONSTRUCTION, REPAIR, RENOVATE, CHANGE THE USE OR OCCUPANCY OF, OR DEMOLISH A DWELLING

Permit No #: TB-16-1120	Date Recieved: **5/19/2016**
Signature: **Able Asphalt**	
Building Commissioner/Inspector of Buildings:	Date

SECTION 1 : SITE INFORMATION

1.1 Property Address **938 GERALDINE ST**	1.2 Assessors Map & Parcel Number **120-20**
1.3 Zoning Information **RA** Zoning District ____ Proposed Use	1.4 Property Dimensions **10634** Lot Area ____ Frontage (ft)

1.5 Buildling Setbacks (ft)

Front Yard		Side Yard		Rear Yard	
Required	Provided	Required	Provided	Required	Provided
0.00	**0.00**	**0.00**	**0.00**	**0.00**	**0.00**

1.6 Water Supply	**False**	1.7 Flood Zone Information		1.8 Sewage Disposal	**False**

SECTION 2: PROPERTY AUTHORIZED AGENT

Agent of Record

Able Asphalt	**128 Woodcock Road**	**North Dartmouth**	**MA**	**02747**
Name	Address			

SECTION 3: Description of Proposed Work

Permit For: **Driveways - 30.00**

Brief Description of Proposed Work:

resurface driveway

m.s.

SECTION 4: Estimated Construction Costs / Permit Fees

		Payment Date	Amount Paid	Check No
Total Project Cost :	**$4,600.00**			
Total Permit Fee Paid:	**$0.00**			

Account Number : 02401200-453010 ISPBPM

& Existing 18'x10' Hot mix Asphalt brow
To Curb
Install 18'x10' Hot mix Asphalt brow

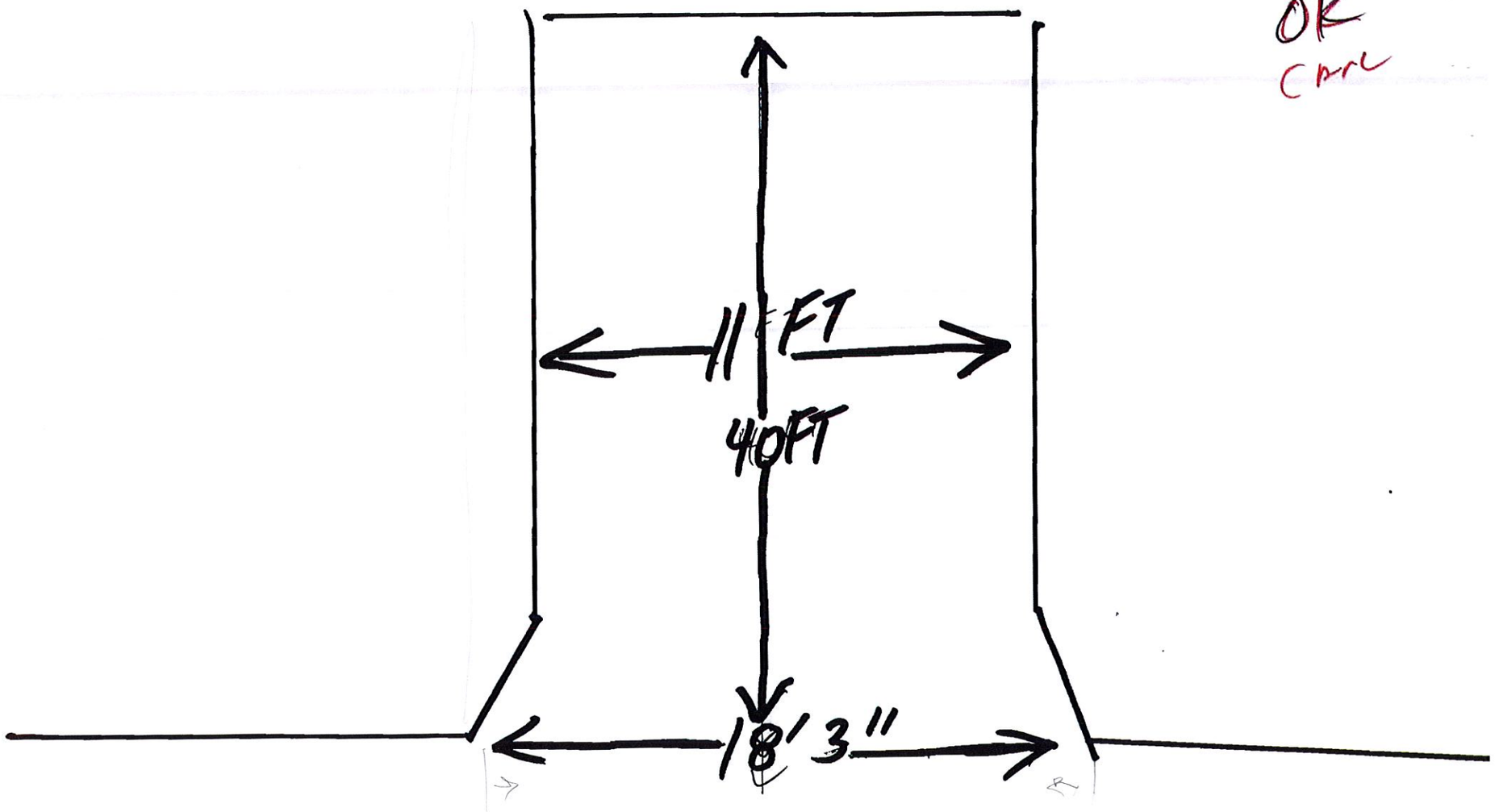
MHS
6/3/2016
DPI-ENG

THIS IS NOT A PERMIT

938 Geraldine ST.

10,634 SF

OK
CMC



#938

Google Maps Geraldine St

Image capture: Sep 2012 © 2016 Google

Massachusetts

Street View - Sep 2012

Google Maps

Rip out driveway New
& Replace with asphalt

18' x 40'
W L

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): Able Asphalt, Inc.

Address: 128 Woodcock Rd.

City/State/Zip: Dartmouth, MA 02747 Phone #: (508) 636-9700

Are you an employer? Check the appropriate box:

1. ☑ I am a employer with 5 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 Driveways

*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: Travelers Ins.

Policy # or Self-ins. Lic. #: UBOC45252-5 Expiration Date: 7/8/2015

Job Site Address: 938 Geraldine St. City/State/Zip: New Bedford

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: [signature] Date: 5/18/16

Phone #: (508) 636 9700 OR (508) 5093702

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 #:** _____

Ana S. Rosa

From: Maria Sequeira
Sent: Monday, May 23, 2016 3:44 PM
To: Manuel Silva; Ana S. Rosa; Donna M. Amado; Carl Bizarro
Subject: Permit/Application: TB-16-1120 at 938 GERALDINE 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 Sequeria
Department of Inspectioinal Services

Ana S. Rosa

From: Danny Romanowicz
Sent: Tuesday, May 24, 2016 10:05 AM
To: Ana S. Rosa; Manuel Silva
Subject: Permit/Application: TB-16-1120 at 938 GERALDINE ST for Driveways - 30.00

Please review .....approve or deny with comments

Thank you
Danny

Danny D. Romanowicz
Danny D.Romanowicz C.B.O.
Commissioner of Buildings
and Inspectional Services

133 William Street
New Bedford, Ma. 02740
Telephone 508 979 1540
Fax 508 961 3143
danny.romanowicz@newbedford-ma.gov.

Ana S. Rosa

From: Danny Romanowicz
Sent: Tuesday, May 24, 2016 10:45 AM
To: Ana S. Rosa
Subject: RE: Permit/Application: TB-16-1120 at 938 GERALDINE ST for Driveways - 30.00

Ok sorry for the duplicate ...enjoy the day....

From: Ana S. Rosa
Sent: Tuesday, May 24, 2016 10:15 AM
To: Danny Romanowicz
Cc: Manuel Silva
Subject: RE: Permit/Application: TB-16-1120 at 938 GERALDINE ST for Driveways - 30.00

Danny...

We received the request from Maria at 3:44 p.m. yesterday. Manny is not in the office this week. It will be addressed between today and tomorrow.

Ana

From: Danny Romanowicz
Sent: Tuesday, May 24, 2016 10:05 AM
To: Ana S. Rosa; Manuel Silva
Subject: Permit/Application: TB-16-1120 at 938 GERALDINE ST for Driveways - 30.00

Please review .....approve or deny with comments

Thank you
Danny

Danny D. Romanowicz
Danny D. Romanowicz C.B.O.
Commissioner of Buildings
and Inspectional Services

133 William Street
New Bedford, Ma. 02740
Telephone 508 979 1540
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danny.romanowicz@newbedford-ma.gov.

Commonwealth of Massachusetts

CITY OF NEW BEDFORD

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

BUILDING PERMIT

6/8/2016

No. **B-16-1120**

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.

FEE PAID: **$30.00**

ParcelID **120-20**

This certifies that Able Asphalt **Contractor Lic. #** _____

owner/contractor has permission to: Driveways - 30.00

on: 938 GERALDINE 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: **Carl Bizarro** 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

Danny O. Romanowicz

Building Commissioner

Plan Review Comments: : Manuel H. Silva - DPI : Existing 18'x10' Hot Mix Asphalt brow ; No curb ; Install 18'x10' Hot Mix Asphalt brow.

: scope of work- install asphalt surface over existing crush stone

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MASSACHUSETTS
ENGINEERING – 508-979-1550

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____	Curb Needed		____	Curb Removal	
			____	Concrete	
			✓	Bituminous Concrete	Install 18 x 10

Bonded Contractor: Able Asphalt **Tel:**

Traffic Commission: _____ Approved _____ Rejected _____ Date

N/A _____
Signature

Building Dept.

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Danny Bomanowicz
Signature

Engineering Department ✓ Approved _____ Rejected 6/3/16 Date

Manuel Sa (MS)
Signature

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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 Sa
Supervising Civil Engineer

BY: Mallory Sa

_____
Property Owner

✓ _____

978 Geraldine ST. 10,65

OK
Curb