



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

APPLICATION FOR
CONSTRUCTION OF
PAVED
SIDEWALK/DRIVEWAY

Application No. 11,275 Expires: 8/17/17
Property Owner: Mike Simmons Date: 8/17/16
Address: 340 Belair St. VB MA. 02410
street city state zip code
Tel: _____

The above hereby requests permission to construct a paved: ☒ driveway / ☐ sidewalk located at
340 Belair St., plot 130B, lot 383 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	Existing <u>13' x 13'</u> hot mix asphalt <u>30'</u>
☐ Concrete Full Width	☐	☐ Commercial	
☐ Concrete Ribbon	☐	☐ Relocation/Widening	
☐ Curb Needed	☐	☐ Curb Removal	
		☐ Concrete	
		☒ Bituminous Concrete	Install <u>13' x 13' hot mix asphalt Brown</u>

Bonded Contractor: Cable Asphalt Tel: _____
Traffic Commission: _____ Approved _____ Rejected _____ Date _____

Building Dept. N/A
Signature _____

Approved (New Building)

Approved - Bldg. Permit# _____

Rejected

Engineering Department ✓ Approved _____ Rejected 5/16/19 Date _____
Manuel H. Silva Signature _____
C.F. (C.F.)



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-16-1020

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 **Able Asphalt**

owner/contractor has permission to:

Driveways - 30.00

on: **340 BELAIR 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 : Remove and repave existing driveway.

Department/Commission:

YOUR AREA INSPECTOR IS: **Thomas Welch**

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

Building Commissioner

Donny J. Pinnone

Plan Review Comments: : Manuel H. Silva : Existing 13'x13' Hot Mix Asphalt brow. No curb. Install 13'x13' Hot Mix Asphalt brow.



6/8/2016

FEE PAID: \$30.00

Parcel ID 130B-383

Manuel Silva

From: Jennifer Grime
Sent: Friday, May 13, 2016 1:33 PM
To: Manuel Silva; Ana S. Rosa; Donna M. Amado
Subject: Permit/Application: TB-16-1020 at 340 BELAIR ST for Driveways - 30.00

Please review the above permit for your approval.

Thank you

Jennifer Grime
Administrative Specialist
Inspectional Services Department
133 William Street, Rm 308
New Bedford, MA 02740

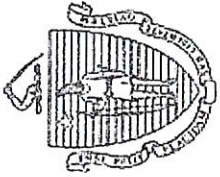
508-979-1540 ex 67212

Repair exist. driv

*340 Belair St.
Michael Simmons
P130 B
L 383*

** Existing 13' x 13' Hot mix Asphalt brow
No Curb
Install 13' x 13' Hot mix Asphalt brow*

MRS 5/16/2016 DSI-ENR



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: Dorchester, MA 02747 Phone #: (508) 630-9700

Are you an employer? Check the appropriate box:

1. ☒ I am an 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: Truckers Ins.

Policy # or Self-ins. Lic. # 460045252-5

Expiration Date: 7/8/2015

Job Site Address: 340 Belair 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: 4/28/16

Phone #: (508) 630-9700 or (508) 5093700

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 #: _____

Google Maps Belair St

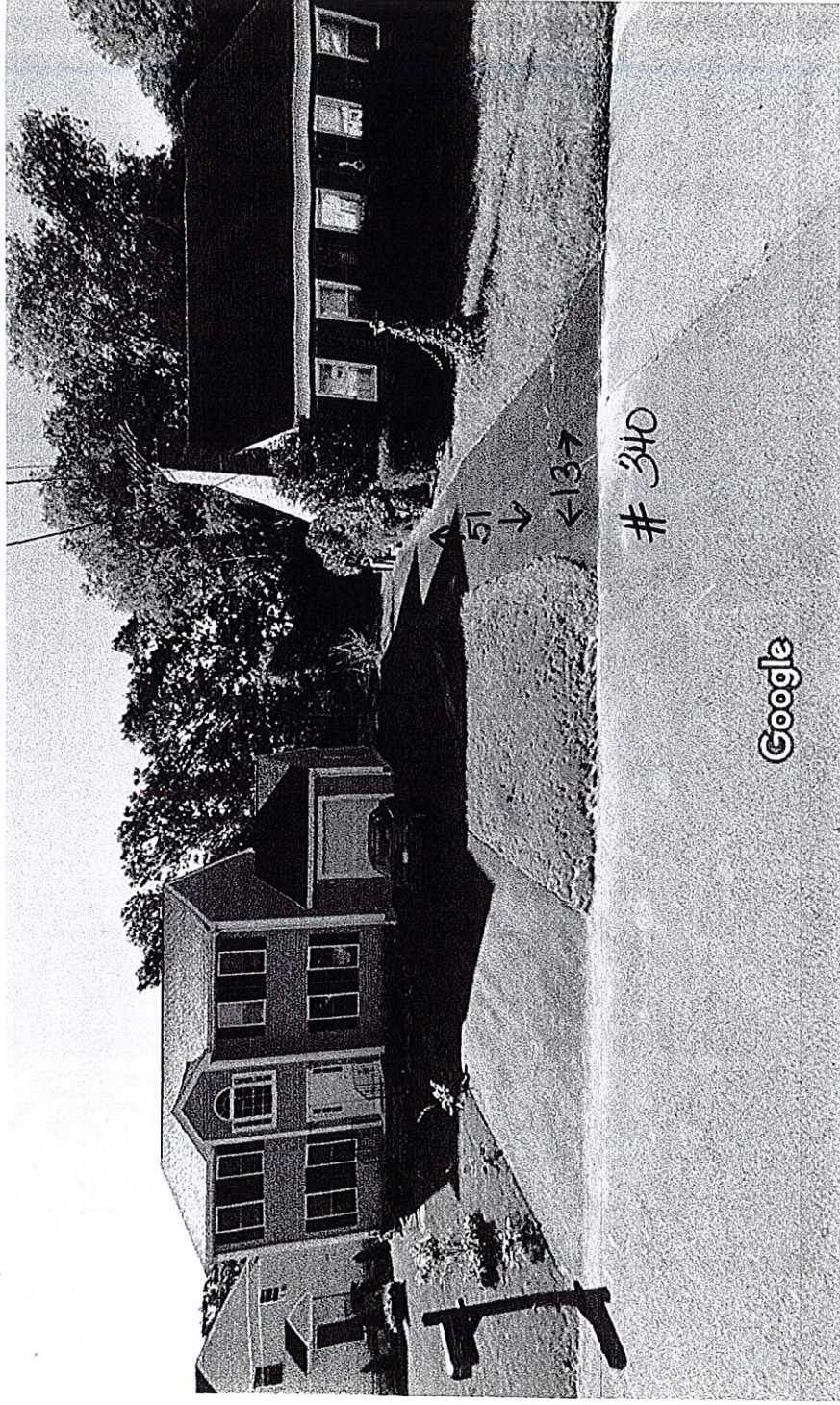


Image capture: Sep 2012 © 2016 Google

New Bedford, Massachusetts

Street View - Sep 2012



Google Maps

* Rip out existing driveway
+ repave *



**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

*
Insp. 8/18
9 AM

To Whom It May Concern:

I Mike Simms (Name) 340 Belair St. (Mailing Address), being

Owner of property located at

340 Belair St.

Plot

, Lot

, hereby agree to allow

(Name)

Able Asphalt Inc.

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

M Duarte

Signature

340 Belair St.

Address

8/10/10

Date

774 526 8258

Telephone number



CITY OF NEW BEDFORD

MASSACHUSETTS

ENGINEERING - 508-979-1550

Inspector @ 8/18 @ 9am

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SIDEWALK/DRIVEWAY

Application No. 11,275

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☐ Concrete Ribbon	_____	☐ Relocation/Widening	_____
☐ Curb Needed	_____	☐ Curb Removal	_____
		☐ Concrete	_____
		☒ Bituminous Concrete	Install <u>13' x 13' hot mix asphalt base</u>

Bonded Contractor: Cable Asphalt Tel: _____

Traffic Commission: _____ Approved _____ Rejected _____ Date _____

Building Dept. _____ Signature _____
Approved (New Building) _____
Approved - Bldg. Permit# _____
Rejected _____

N/A

_____ Signature _____

Engineering Department

Approved ☒ Rejected ☐ Date 5/16/14

Pre-Inspector 2016 5/16/14
Manual 44. Shra CA

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Repair exist. drive

*340 Belair St.
Michael Simmons*

P130 B

L 383

** Existing 13' x 13' Hot mix Asphalt brow
No Curb
Install 13' x 13' Hot mix Asphalt brow*

MRS 5/16/2016 DFI-ENG

MRS 5/16/2016
 Exist. 13' x 13' Hot mix Asphalt brow
 No curbs
 Install 13' x 13' Hot mix Asphalt brow



Belair St.

rough

832 577 7456