



CITY OF NEW BEDFORD

MASSACHUSETTS

APPLICATION FOR
CONSTRUCTION OF
PAVED
SIDEWALK/DRIVEWAY

ENGINEERING - 508-979-1550

Application No. 11291

Expires: 9/28/17

Date: 9/28/16

Property Owner: Cayo Hueso Holdings Tel: _____

Address: 29 Ausseels mill rd city _____ state _____ zip code _____

The above hereby requests permission to construct a paved: 0 driveway / _____ sidewalk located at
17 Freedom Blvd New Bedford, plot 6, lot 30 in accordance with the
terms and conditions set forth herein, and the Ordinances of the City of New Bedford.

Sidewalk	Dimensions	Driveway	Width (ft)
<u>Bituminous Concrete</u>	<u>0</u>	<u>Residential</u>	<u>existing 22'8"</u>
<u>Concrete Full Width</u>	<u>_____</u>	<u>Commercial</u>	<u>_____</u>
<u>Concrete Ribbon</u>	<u>_____</u>	<u>Relocation/Widening</u>	<u>_____</u>
<u>Curb Needed</u>	<u>_____</u>	<u>Curb Removal</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>Concrete</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>Bituminous Concrete</u>	<u>install 22' x 8'</u>

Bonded Contractor: ABLE Asphalt Tel: _____

Traffic Commission: _____ Approved _____ Rejected _____ Date _____
N/A

Building Dept. _____ Approved (New Building) _____
_____ Approved - Bldg. Permit# B-10-1779
_____ Rejected _____
Danny Pomanowicz
Signature _____

Engineering Department _____ Approved _____ Rejected _____ Date _____
2/3/14
Manuel Silva
Signature (MSS)

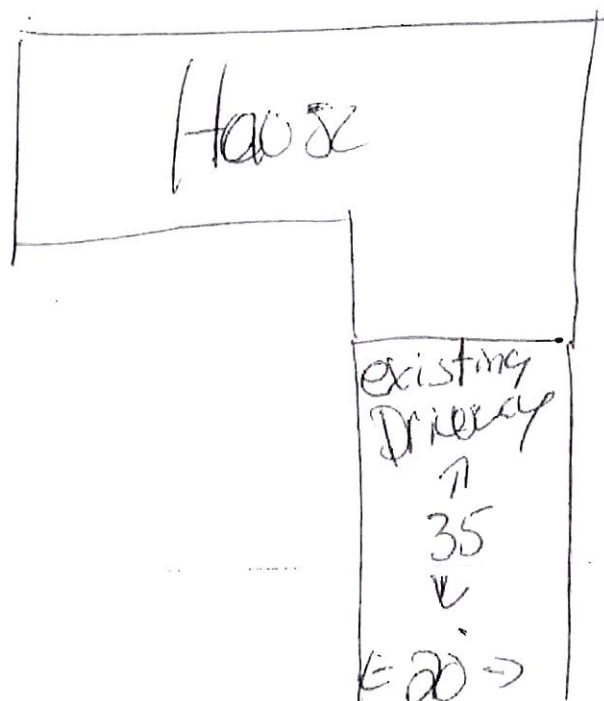
Permit/Inspection fee of \$150.00 must accompany this application.

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

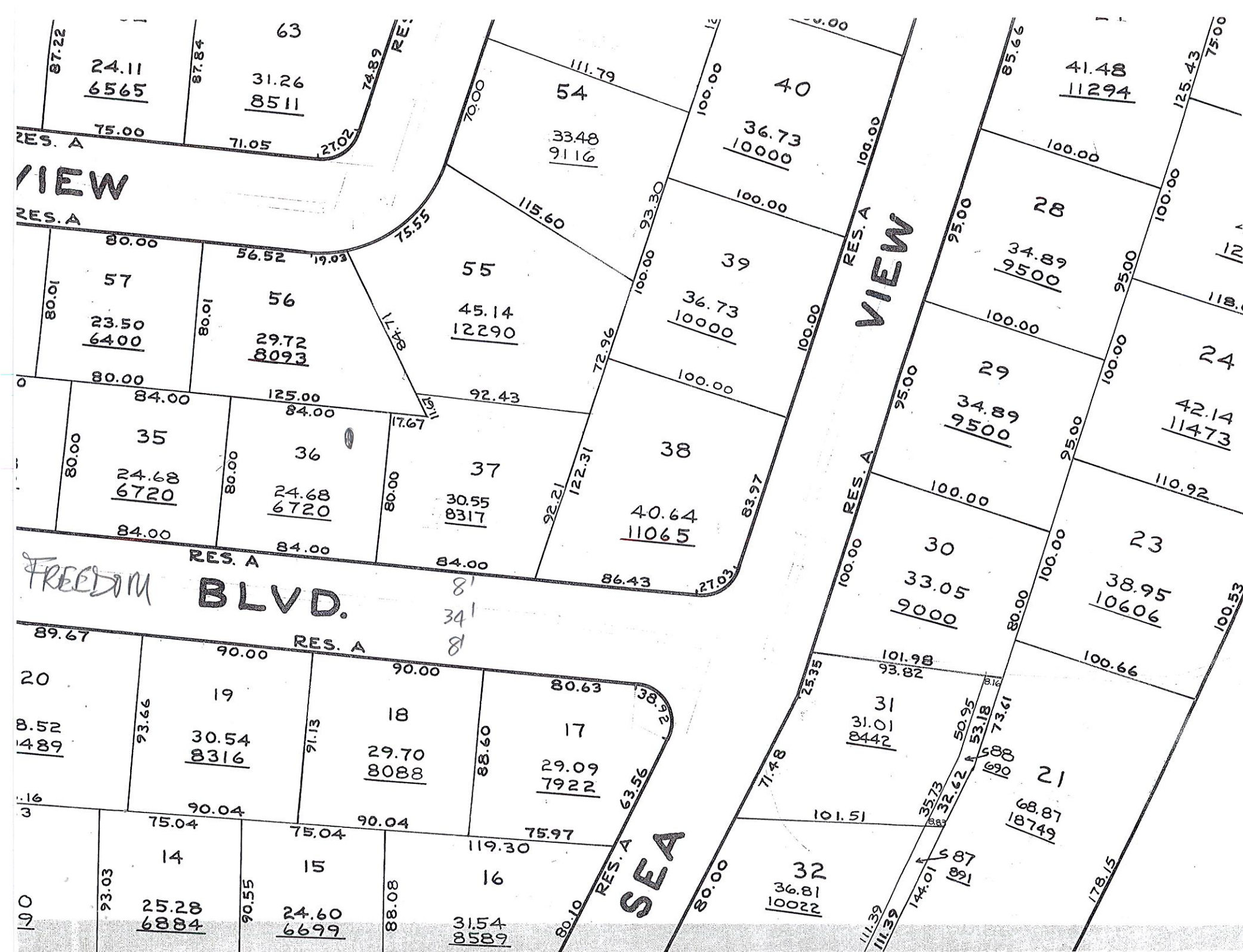
Manuel H. Silva
Supervising Civil Engineer
BY: Deputy Commissioner
Malone
Property Owner [Signature]

OK
CB

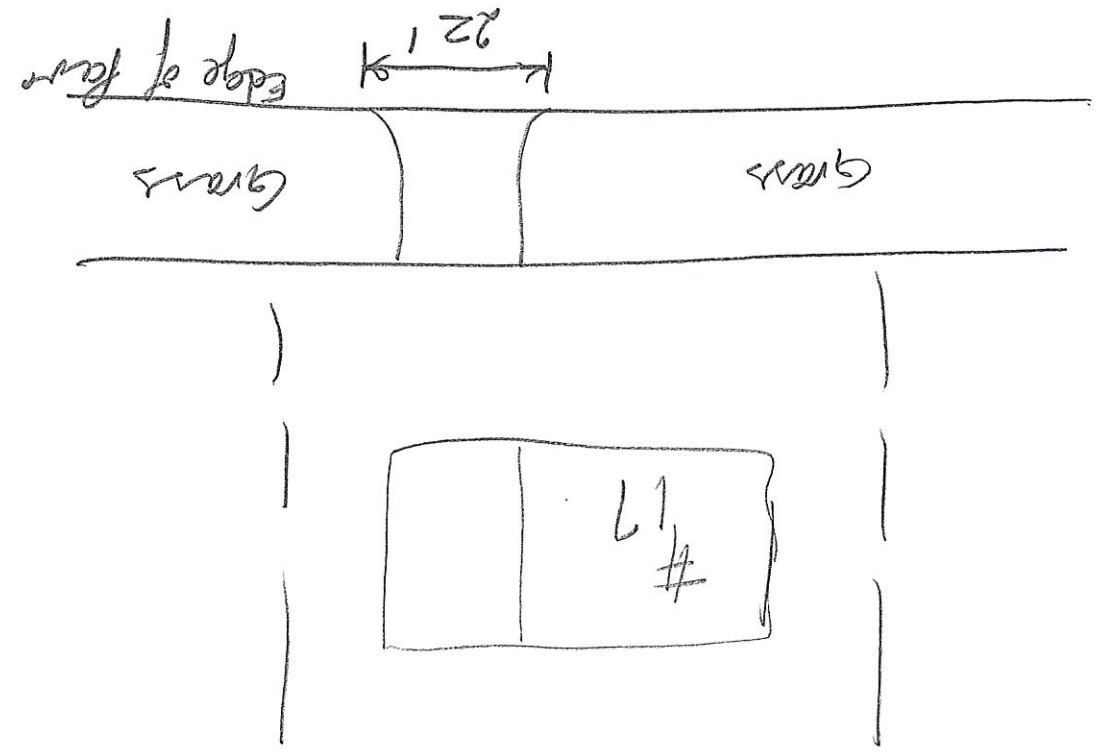


17 Freedom Blvd
JOB SITE

ABLE ASPHALT, INC.
128 WOODCOCK ROAD
N. DARTMOUTH, MA 02747
(508) 636-9700

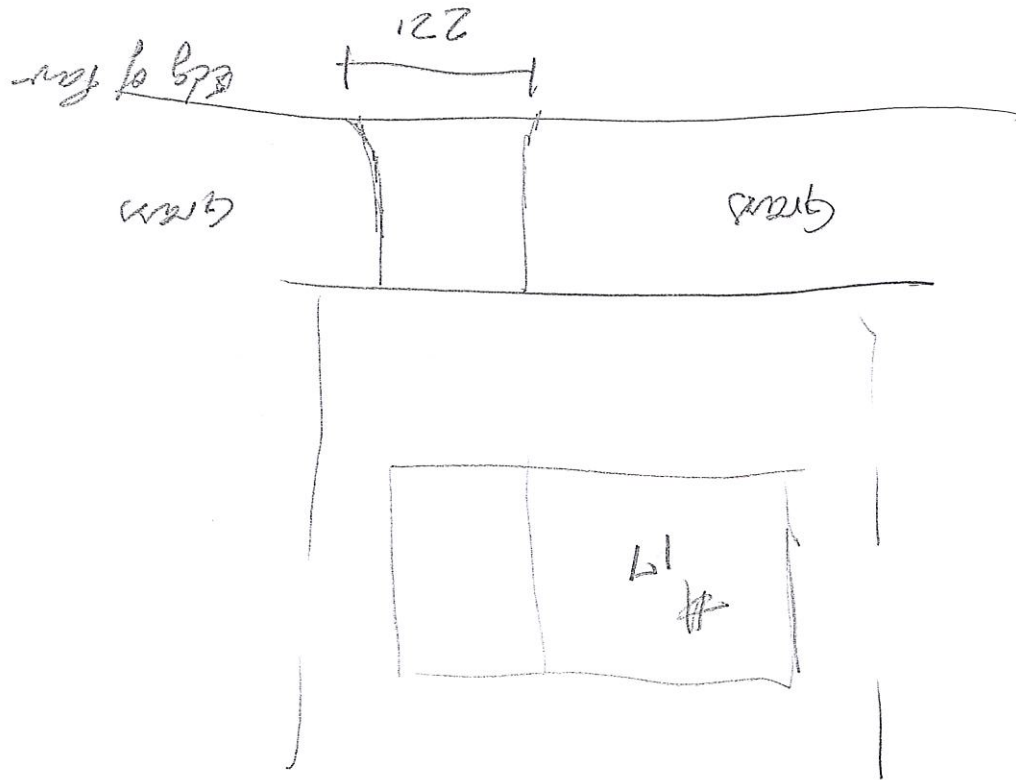


Freedom Plot



8/11/10
 MHS
 E. 22' x 8' Hot was removed from
 10 Grande Curb
 22' x 8' Hot was removed from
 22' x 8' Hot was removed from

Freedom Blvd



8/2/2015
MMS

Manuel Silva

From: Malissa Rosanina
Sent: Monday, August 01, 2016 2:29 PM
To: Manuel Silva; Ana S. Rosa; Donna M. Amado; Carl Bizarro
Subject: Permit/Application: TB-16-1779 at 17 FREEDOM BLVD for Driveways - 30.00

Please review the following permit for 17 Freedom Blvd. The documents you need are attached to the permit.

Thank You!

Best,

Malissa Rosanina

Inspectional Services Rm 308

133 William Street New Bedford, Ma 02740

508-979-1540 Ext 67222

repave exist. drive

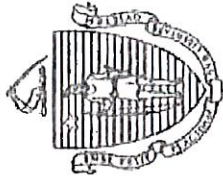
17 Freedom Blvd
~~17~~ Cayo Hueso Holdings
P6
h3b

* Exist. 22'x8' Hot mix asphalt brow
No Granite Curb
Install 22'x8' Hot mix Asphalt brow

MRS

8/3/2016

DPI-ENG



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 ROAD
N. DARTMOUTH, MA 02747
City/State/Zip: (508) 636-9700 Phone #:

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 partner-ship 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 attach 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. #: 460045552-5 Expiration Date: 7/8/16 - 7/8/17

Job Site Address: 16 Freedom Blvd 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: 7/20/16

Phone #: 508-636-9700

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 #: _____



Commonwealth of Massachusetts

CITY OF NEW BEDFORD

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



BUILDING PERMIT

9/22/2016

No. **B-16-1779**

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.

FEE PAID: **\$30.00**

This certifies that **Able Asphalt**

Contractor Lic. # _____

ParcelID **6-36**

owner/contractor has permission to: **Driveways - 30.00**

on: **17 FREEDOM BLVD**

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

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

Department.Commission: _____

BUILDING DEPARTMENT COMMENTS

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

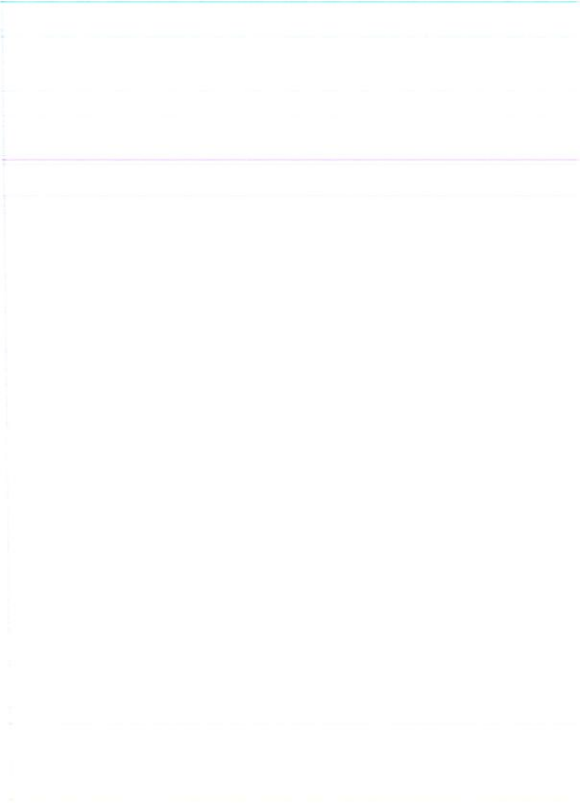
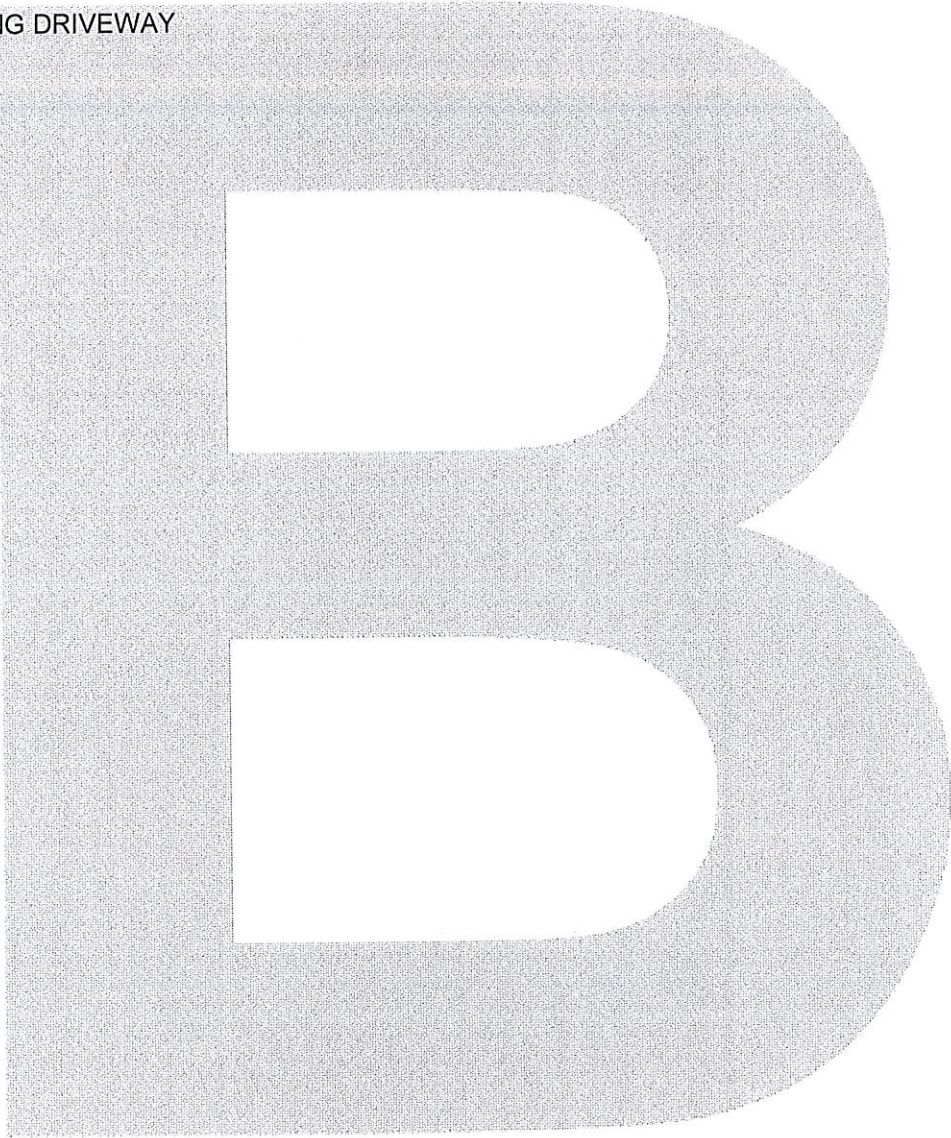
This Card Must Be Displayed in a Conspicuous Place on the Premises and Not Torn Down or Removed Until Completion of Work

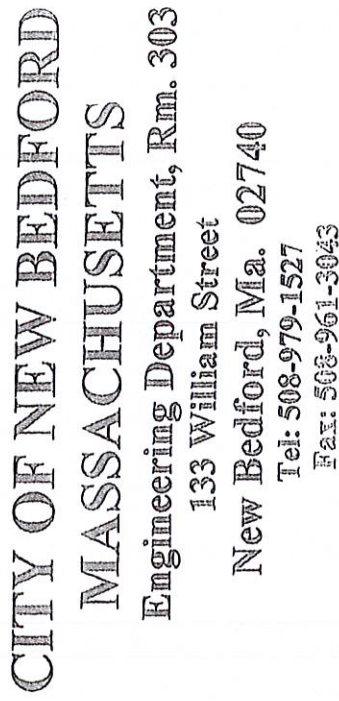
SUBJECT TO MASSACHUSETTS
STATE BUILDING CODE

Building Commissioner

Plan Review Comments: : Manuel H. Silva - DPI : Existing 22'x8' Hot Mix Asphalt brow; No Granite curb; Install 22'x8' Hot Mix Asphalt brow

: REMOVE - THEN
RE PAVE EXISITING DRIVEWAY





To Whom It May Concern:

Owner of property located at 17 Freedom Blvd.

Signature in securing

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

Handwritten signature: *Handwritten signature*

五

Signature _____
29 Hussells Mills Rd.

556-666

9/20/16

卷之四

508-609-7579
Telephone number

1244



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Signature

Engineering Department _____ Approved _____ Rejected 8/3/16 Date _____
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Signature

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Manuel H. Silva _____
Supervising Civil Engineer
Deputy Commissioner
BY: Malloy _____
Property Owner [Signature]

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