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

APPLICATION FOR CONSTRUCTION OF PAVED SIDEWALK/DRIVEWAY

6802.01/1

Expires: 5/10/18

Application No. 11330 Date: 5/10/17

Property Owner: NOA T. Huygu Tel: _____

Address: 65 metcalf st New Bedford MA
street city state zip code

The above hereby requests permission to construct a paved: X driveway / _____ sidewalk located at 65 Metcalf St., plot 127C, lot 387 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	_____	X	Curb Removal (no charge)	40+ conic. curb
			X	Concrete	40'x13'
			____	Bituminous Concrete	_____

Bonded Contractor: Morgado Company **Tel:** _____

Traffic Commission: _____ Approved _____ Rejected _____ Date

N/A
Signature

Building Dept.

_____ Approved (New Building)
X Approved - Bldg. Permit# B-17-594
_____ Rejected

Danny Romanazzi
Signature

Engineering Department X Approved _____ Rejected 4/5/17 Date

Robert Bichel (MB)
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

Robert Bichel
Supervising Civil Engineer
Clerk of the works
BY: Mallory

X Sarah Morgado
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-17-594**

5/4/2017

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 **127C-387**

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

owner/contractor has permission to: Driveways - 30.00

on: 65 METCALF 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: _____	: Concrete driveway & expanding entrance as per plans submitted,corrected and returned to contractor and a copy for the owner

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

Danny O. Romanowicz

Building Commissioner

Plan Review Comments: : Bob Bichel - DPI / ENGR.- Install 6' x 13' Cemment Concrete widening to existing 12'x13' Concrete Apron for max 18' wide

:

Department of Public Infrastructure

Euzebio Arruda
Commissioner

Water
Wastewater
Highways
Engineering
Cemeteries
Park Maintenance
Forestry
Energy

CITY OF NEW BEDFORD
Jonathan F. Mitchell, Mayor

To Whom It May Concern:

I Nga Huysh (Name) 65 Metcalf St. (Mailing Address), being

Owner of property located at

65 Metcalf St.

Plot 127C, Lot 387, hereby agree to allow Morgado Company (Name)

1 Annie's Path (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 nga Teagle (Signature)

65 Metcalf St. (Address)

May 9, 2017 (Date) _____ (Telephone Number)

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

Robert Bichel

From: Maria Sequeira
Sent: Monday, April 03, 2017 1:52 PM
To: Manuel Silva; Ana S. Rosa; Robert Bichel; Donna M. Amado
Subject: Permit/Application: TB-17-594 at 65 METCALF 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

65 METCALF ST.
NGA T. HUYGU
P. 127C L. 387

WIDEN EXISTING DRIVEWAY

REMOVE + DISCARD 6' CONC. CURB
INSTALL 6' X 13' CONC. APRON
TOTAL DRIVEWAY APRON WIDTH
NOT TO EXCEED 18 FEET
RP - 4/5/17 - 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): 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. ☑ 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 Driveway

*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. #: BAWC597920 Expiration Date: May 2017

Job Site Address: 65 Melcalf St. City/State/Zip: New Bedford MA

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: Feb 28, 2017

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 #:** _____

Google Maps 62 Metcalf St

Image capture: Sep 2012 © 2017 Google

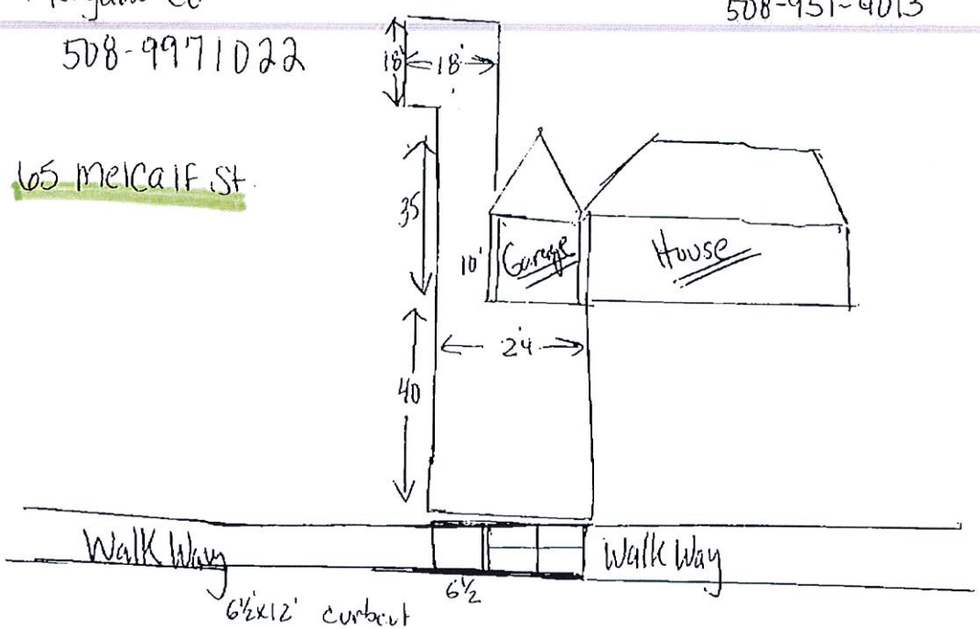
New Bedford, Massachusetts

Street View - Sep 2012

Morgado Co
508-9971022

Home owner
508-951-4013

65 Melcalf St

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