APPLICATION/AGREEMENT

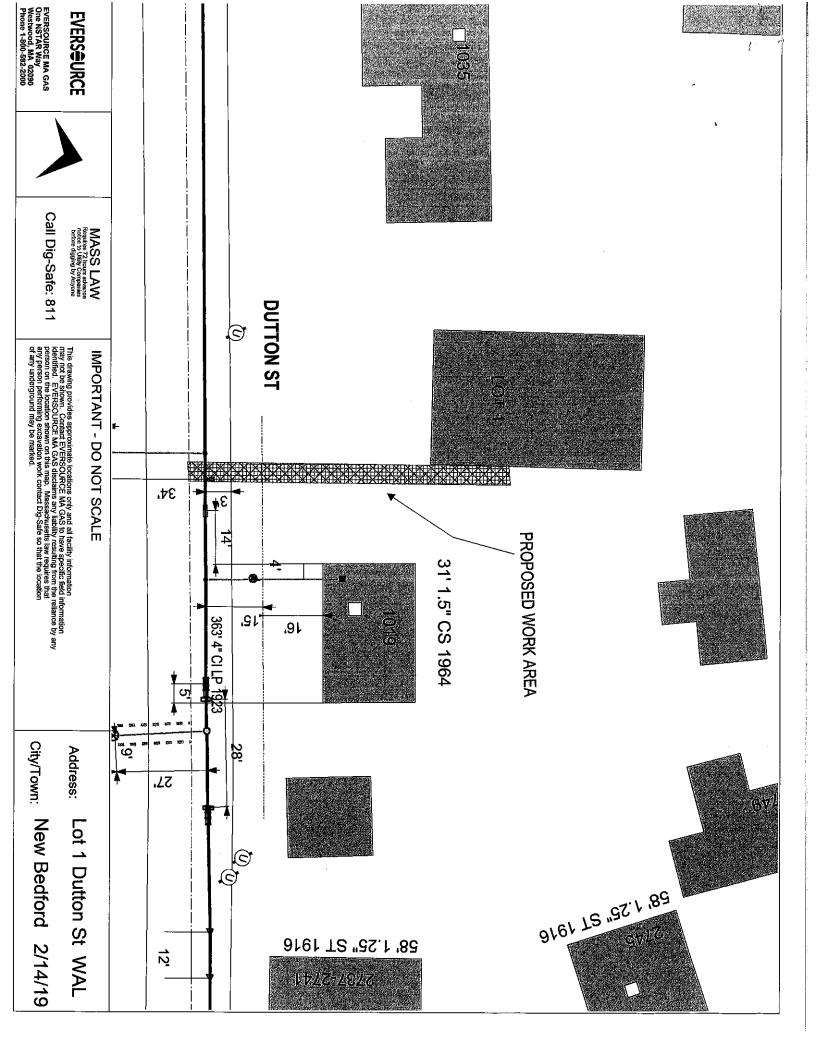
For Trench/Disturbance Permit within the City of New Bedford

Permit # 130 - 1

Date: <u>02/19/19</u>

TO THE MAYOR AND CITY COUNCIL: DISTURBAN	DISTURBANCE PERMIT/TRENCH SAFETY PERMIT
Permission is hereby requested to excavate the surface of: X City Property	City Pronerty and/or X_Private Property
Location of Work: Lot 1 Dutton St. FOR INSPECTION ONLY A 24 HOUR NOTICE IS REQUIRED AND THE	Provide Sketch
	E D.P.I. ROADWAY CLOSURES WILL REQUIRE OF AUTHORIZATION FROM THE COMMISSIONOR OF PUBLIC INFRASTRUCTURE, TRAFFIC MANAGEMENT
Work will begin (weather permitting) on: March 5, 2019	9 PLANS MAY BE REQUIRED.
Applicant Name: Robert Conklin Troburt Cally (60)	Excavator(s) Name:
Company Name: <u>Eversource</u>	Hoisting Equipment License Number: Grade: Expiration Date:
Contact Number: 508-441-5817	Name & Contact Number of Insurer:
Competent Person on Work Site: ON FILE	APPROVED BY: Ciclim State DATE: 2-26-19
	TITLE: Sup. Civil Engineer

This permit shall be posted at the work site, and shall remain until the work is completed. It is subject to inspection at all times.



SEE ACTIVITY REPORT #__

EVERSEURCE DIG SAFE #: 20190704502 START DATE: 02/21/2019 8:30:00 AM

SEQUENCE #: 37

START DATE: 02/21/2019 8:30:00 AM

STATION CODE:

RCVD DATE: 02/15/2019 8:29:00 AM

CP

	REGULAR		PREV. REQ. #:
<u>LOCATION</u>	Ticket Type:	NORMAL	
TÜWN: NEW BEDFORD			
ADDRESS: DUTT	ONST		
CROSS STREET: ACUSHNET AVE	I	CROSS STREET 2:	ASHLEY BOULEVARD
ADDITIONAL INFO: WKG @ LOT 1 LOC IS A PROP UND	ED CONST ACDOSS EDOA	4 1000 DUTTON S	T
WING W COLL FOCION PROP DIVE	ER CONSTACROSS FROM	1, 1949 DOTTON 5	1,
<u>GENERAL INFORMATION</u>			
NATURE OF WORK: INSTALL GAS S	ERVICE		AREA IS PREMARKED, YES
EXTENT OF WORK: WKG ST & STT			
<u>CONTRACTOR</u>			
CALLER: ROBIN	TITLE: ADMIN		CALL BEFORE: B 330PM
TELEPHONE: (508)-441-5809 ext.	ALT:		FAX #: (508)-441-5890 ext.
EMAIL ADDRESS: robin.elves@evers	source.com		() · · · · · ·
CONTRACTOR: NSTAR GAS 50 DUCHAINE BLVD EXCAVATOR DOING WORK: SAME	NEW BEDFORD, MA 02745	5	
LOOK-UP PERSON:	DATE: (1 CACT II	20M ANI) CLESTEL)
LUUK-OF PENSUN:	UATEIL] CAST IF	RON (X)[] C.I. SIZE:[]
LOOK-UP PERSON COMMENTS:			
() GIS Used () GIS Incorrec	rt		
MARKOUT INFORMATION			
MARKOUT PERSON:	#:	<u>.</u>	
MARKOUT DATE:	TIME:	AREA PRE	-MARKED: () YES () NO
CHECK ALL THAT APPLY: () NOT MAI	RKED NOTIFIED [] MAR	KED [] SITE \	ASIT [] ON GOING
ENTER (X) IF: [] CAST IRI	ON WILL BE EXPOSED OR A	FFECTED BY EXCAN	/ATION
• •	ON WILL NOT BE EXPOSED		1
() NEITHEF	OF THE ABOVE CAN BE DE	TERMINED AT THIS	5 TIME
MARKOUT COMMENTS:			
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___ FOR ADDITIONAL COMMENTS