



110-19

APPLICATION FOR
PERMIT FOR STREET OBSTRUCTION
(Under New Bedford City Code, Chapter 22)

New Bedford, Mass: May 31, 2019

To the Mayor and City Council:

The undersigned respectfully requests permission to obstruct

Location of obstruction applied for
(Number of building and side of street)

370 Cedar Street

for purpose of tree trimming

Material of outside walls of building

Time provided in contract for completion of work 5/31/19-6/7/19; if no contract, the estimated time required to complete the construction, rebuilding or repairs

Time for which space is applied ✓

Space proposed to be obstructed in street or sidewalk:

Length 7 1/2 ft +/-

Projection into sidewalk Full width

Projection into roadway NONE

Nature of obstructions Tree trimming Equip (sheet 1/114)

Provisions made for travelers opposite side of street

As further consideration for this permit, the applicant shall hold the City of New Bedford harmless and indemnify it for any and all injury to loss, cost, damage, expense, (including reasonable attorneys fees) and liability on account of the obstruction in the street and/or sidewalk and any work done in connection therewith.

Signature of Applicant x [Signature]

Company

Mike & Mike's Tree Service

Address

52 Rogerson Avenue

Acushnet, Ma

Telephone #

774-942-8941

Consent of the Commissioner of Public Infrastructure

New Bedford, Mass.

I do consent to the above application.
do not

I suggest the following conditions be included in permit

I do consent to the above application
do not

Consent of the Commissioner of Buildings

Commissioner of Public Infrastructure

Acushnet, Ma

I suggest the following conditions be included in permit

Commissioner of Buildings

TIME RECEIVED
May 31, 2019 11:44:33 AM EDT

REMOTE CSID
5086751010

DURATION
70

PAGES
1

STATUS
Received

22 Nov 2019 10:41 HP Fax 5086751010 page 1



MIKE&MI-01

CERTIFICATE OF LIABILITY INSURANCE

CDOMINGOS

DATE (MM/DD/YYYY)
08/31/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. IF SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Foundation Insurance Agency LLC
800 Davol Street
1st Floor
Fall River, MA 02720

CONTACT NAME:
PHONE (A/C, No. Ext): (508) 689-7504
FAX (A/C, No.): (508) 689-7510
E-MAIL ADDRESS: carpenter@bakkerinsurance.com

INSURED
Mike & Mike Tree Service Inc
52 Rogerson Ave
Acushnet, MA 02743

INSURER(S) AFFORDING COVERAGE
INSURER A: Penn-American Insurance Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

NAIC #

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	POLICY NUMBER	POLICY EFF DATE (MM/DD/YYYY)	POLICY EXP DATE (MM/DD/YYYY)	LIMITS
A	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE ☒ OCCUR	X	PAV0180974	09/20/2018	09/20/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ Included
	GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY ☐ PRO ☐ LOG ☐					
	OTHER:					
	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NONOWNED AUTOS ONLY ☐					
	UMBRELLA LIAB EXCESS LIAB ☐ OCCUR ☐ CLAIMS-MADE ☐					
	DED ☐ RETENTION \$ ☐					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? ☐ Y/N ☐ N/A					
	If yes, describe under DESCRIPTION OF OPERATIONS below					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured: City of New Bedford 133 Williams ST New Bedford MA 02740

CERTIFICATE HOLDER

CANCELLATION

City of New Bedford
133 Williams St
New Bedford, MA 02740

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Chuyel Domingos

ACORD 25 (2016/03)

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