

APPLICATION/AGREEMENT
For Trench/Disturbance Permit within the City of New Bedford

Permit # 21-19
Dig Safe # 2019-440-8740

TO THE MAYOR AND CITY COUNCIL:

DISTURBANCE PERMIT

TRENCH SAFETY PERMIT

Date 11-13-19

Permission is hereby requested to excavate the surface of: _____

City Property

and/or

☒ Private Property
Provide Sketch

Location of Work: 4499 Quaker Ave

Vibra Hospital

Substantially as per plan annexed, for the purpose of: excavate, remove +

replace fire hydrant + install isolation gate for hydrant

Work will begin (weather permitting) on: 11/15/19

Work will end (weather permitting) on: 11/15/19

Applicant Name: Brandon Smith

Excavator(s) Name: Brandon Smith / Alex Carrao

Company Name: Hydra Tech, Inc.

Hoisting Equipment License Number: 1A 8-HE 159270 / 1A-HE 169115

Grade: _____

Expiration Date: 8-3/21/19

Contact Number: 978-422-9001 / 978-833-7241

Name & Contact Number of Insurer: Anastasi Insurance

A-719/21

13th Gravel (508) 2048-1440

Competent Person on Work Site: Brandon Smith

Alex Carrao

APPROVED BY: Alex Carrao

DATE: 11/13/19

TITLE: _____

Attn: Manager

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.



Lori Raultis <lori@hydratetechwater.com>

Trench Permit Information

1 message

Chevell A. Torres <C.Torres@newbedford-ma.gov>
To: "lori@hydratetechwater.com" <lori@hydratetechwater.com>

Fri, Nov 8, 2019 at 11:26 AM

Good morning,

Per our telephone conversation,

Below is some of the information we will need to fill out a trench permit. Once the check is sent in we then at that time can issue permit, and send back in mail with receipt. Any plans/sketch you may have for this job should be sent in as well.

- Location of Work: Vibra Hospital - 4499 Acushnet Ave
- Type of work/purpose of: hydrant replacement + install hydrant isolation gate
- Work will begin: 11/15/19
- Work will end: 11/15/19
- Applicant Name: Hydratech Inc / Brendan Smith
- Company Name: Hydratech Inc / Brendan Smith
- Contact Phone Number: 978 422 9001
- Competent Person on Work Site: Brendan Smith / Alex Garceau
- Excavator Name: Brendan Smith / Alex Garceau
- Hoisting Equipment License Number: HE 159 270 / Alex
 - Grade: 1B / 2A
 - Expiration date: 3/24/21
- Name & Contact Number of Insurer: Anastasi Insurance Kristi Gravel
- Digsafe #: 2019 440 8760 508-248-1440

Trench Permit is for inside work, not within City layout. Checks are made payable to the City of New Bedford. \$30.00

Any questions please feel free to reach out.

Thank you.



Chevell Torres

Principal Clerk

City of New Bedford | Public Infrastructure

1105 Shoremut Ave, New Bedford, MA 02746

508.979.1550 x 67305 email: ctorres@newbedford-ma.gov



CERTIFICATE OF LIABILITY INSURANCE

DATE REPRODUCED
11/03/2019

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 Anastasi Insurance Agency, Inc. 4 Brookfield Rd. P.O. Box 1261 Chaffin City MA 01508	CERTIFICATE NUMBER 4291533 REV. DATE 05/01/2019 ISS. DATE 05/01/2019 ISS. BY Anastasi2019@gmail.com REV. DATE 05/01/2019 ISS. BY Anastasi2019@gmail.com
INSURED HYDRA TECH, INC. PO BOX 258 STERLING MA 01564-0258	INSURANCE AFFORDING COVERAGE INSURER A Employers Mutual Casualty Company INSURER B Continental Indemnity INSURER C INSURER D INSURER E INSURER F

COVERAGES

CERTIFICATE NUMBER: 19-35

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.

TYPE OF INSURANCE	INSURER	POLICY NUMBER	POLICY EFF. DATE	POLICY EXP. DATE	LIMITS
☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS MADE ☒ OCCUR ☐ GEN'L AGGREGATE LIMIT APPLIES PER POLICY ☒ PROD. ACC. ☐ LOC. ☐ OTHER AUTOMOBILE LIABILITY ☐ BODILY AUTO ☒ COMB. AUTO ONLY ☒ MED. AUTO ONLY ☒ BODILY AUTO ONLY ☒ COMB. AUTO ONLY ☒ MED. AUTO ONLY ☒ UMBRELLA LIA ☒ EXCESS LIA ☒ ATTENTION: 10,000		4291533	04/01/2019	04/01/2020	EACH OCCURRENCE BODILY AUTO MED. AUTO PROPERTY DAMAGE GENERAL AGGREGATE PRODUCTS - COMB OF AGG COMB. AUTO BODILY AUTO (per person) BODILY AUTO (per accident) PROPERTY DAMAGE Uninsured Motorist BI EACH OCCURRENCE AGGREGATE
☒ WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY EMPLOYEE OR PART-TIME EMPLOYEE OR CONTRACTOR WORKING FOR YOU (Mandatory in MA) If you describe under DESCRIPTION OF OPERATIONS below		27-511306-01-01	12/15/2018	12/15/2019	PER EMPLOYEE SICKNESS, INJURY OR DEATH SICKNESS, INJURY OR DEATH SICKNESS, INJURY OR DEATH
☐ Period/Limited Equipment		4291533	04/01/2019	04/01/2020	LIMIT \$ 41,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of New Bedford is listed as additional insured when required per written contract.

CERTIFICATE HOLDER

CANCELLATION

City of New Bedford 1138 Shattuck Ave. New Bedford MA 02746	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
--	---



Commonwealth of Massachusetts
Division of Professional Licensure

Hoisting Engineer

HE-159270

Expires: 03/24/2021

BRENDAN M SMITH
33 MUDDY POND ROAD
STERLING MA 01564



Commissioner

A handwritten signature in black ink, appearing to read "John M.", written over a faint circular watermark.

Hoisting Engineer

Restricted to:

**HE-1B-Telescoping Boom w/Cables Cranes
HE-2A-Excavators**

DIG SAFE Call Center: (888) 344-7233

In case of accident call: 508) 820-1444

For information about this license

Call (617) 727-3200 or visit www.mass.gov/dpi



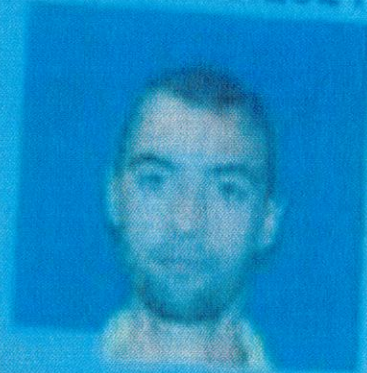
Commonwealth of Massachusetts
Division of Professional Licensure

Hoisting Engineer

HE-169115

ALEX J GARCEAU
110 GARDNER RD
WINCHENDON MA 01475

Expires: 07/09/2021



Commissioner

Maria H. Lyman

8.17

Hoisting Engineer

Restricted to:

HE-1B-Telescoping Boom w/Cables Cranes

HE-2A-Excavators

DIG SAFE Call Center: (888) 344-7233

In case of accident call: (508) 820-1444

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Call (617) 727-3200 or visit www.mass.gov/dpl

8.17

Per our telephone conversation,

Below is some of the information we will need to fill out a trench permit. Once the check is sent in we than at that time can issue permit, and send back in mail with receipt. Any plans/sketch you may have for this job should be sent in as well.

- Location of Work: **Vibra Hospital - 4499 Acushnet Ave**
- Type of work/purpose of: **excavate, remove and replace fire hydrant and install isolation gate for hydrant**
- Work will begin: **11/15/19**
- Work will end: **11/15/19**
- Applicant Name: **Brendan Smith**
- Company Name: **Hydra Tech, Inc**
- Contact Phone Number: **978-422-9001 - 978-833-7241**
- Competent Person on Work Site: **Brendan Smith/ Alex Garceau**
- Excavator Name: **Brendan Smith/Alex Garceau**
- Hoisting Equipment License Number **Brendan - HE 159270 -- Alex HE 169115**
 - Grade **1A/2B**
 - Expiration date: **Brendan 3/24/19 -- Alex 7/9/21**
- Name & Contact Number of Insurer **Anastasi Insurance - Kristi Gravel - 508-248-1440**
- Digsafe # **2019-440-8760**

Trench Permit is for inside work, not within City layout, Checks are made payable to the City of New Bedford. \$30.00

Any questions please feel free to reach out.

Thank you,



Cheveli Torres

Principal Clerk

City of New Bedford | Public Infrastructure

1105 Shawmut Ave, New Bedford, MA 02746

Cheveli A. Torres

From: Lori Rauktis <lori@hydrattechwater.com>
Sent: Friday, November 08, 2019 2:27 PM
To: Cheveli A. Torres
Subject: Fwd: Trench Permit Information
Attachments: Vibra Hospital - trench permit packet - resized.pdf



Lori Rauktis
Office Manager, Hydra Tech, Inc.
978-422-9001 | lori@hydrattechwater.com
hydrattechwater.com
180 Pratts Junction Rd, PO Box 256, Sterling, MA 01564

Create your own email signature

----- Forwarded message -----

From: Lori Rauktis <lori@hydrattechwater.com>
Date: Fri, Nov 8, 2019 at 2:23 PM
Subject: Re: Trench Permit Information
To: Cheveli A. Torres <CTorres@newbedford-ma.gov>

Hi Cheveli

Please see answers in red below. I also attached a copy of the answers, a COI and copies of hoisting licenses in the attached file.

I will mail the entire packet today. We would like to do this next Friday, so hopefully, the check is received Monday. Please call or email me with any questions or concerns and also please let me know when approved via email.....thank you



Lori Rauktis
Office Manager, Hydra Tech, Inc.
978-422-9001 | lori@hydrattechwater.com
hydrattechwater.com
180 Pratts Junction Rd, PO Box 256, Sterling, MA 01564

Create your own email signature

On Fri, Nov 8, 2019 at 11:26 AM Cheveli A. Torres <CTorres@newbedford-ma.gov> wrote:

Good morning,