

oafinus 1/2/2020



PERMIT NO.
24860

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 1/2/2020

This certifies that permission is granted to

Michael Supply Bldg

Hale, William

Property Owner

121 Duane St. Bldg

Tel.

781-953-8158

To connect a sewer and/or storm drain located at 121 Duane St. Bldg

Assessor's Plot 133 Lot 21 to the sewer and/or storm drain in connection to existing sewer line on Duane St. Bldg

To be laid in accordance with the conditions in this application and the City of New Bedford ordinances.

TYPE OF USE: RESIDENTIAL

COMMERCIAL

INDUSTRIAL

FLOW _____ G.P.D.

If applicant other than actual property owner, attach Letter of Authorization from Property Owner.

Name W.S. Stevens

Tel. 781-953-8158

Mailing Address P.O. Box 1044, Marshfield, MA 02550

The Bonded Contractor/Drain Layer authorized to perform this work is:

Tom Side Bros. (Contractors)

Name Tom Side

Address

Tel.

Type of Pipe Required: 6" SDR 35 PVC Sewer

PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE

- Requires separate connections for sewage and storm drain where applicable. Storm water cannot be discharged to a sanitary sewer.
- All work must be inspected and approved by a D.P.I. inspector before backfilling.
- If this connection is to be part of a private service shared jointly with other building owners, attach copy of Recorded Joint Maintenance Agreement.
- Permits can be issued to Industrial and/or Commercial Applicants only upon receipt and approval by the Commissioner of Public Infrastructure of required plans and supplemental information.
- In addition, a City-issued Industrial User Discharge Permit and/or a Sewer Extension/Connection Permit issued by the Commonwealth of Massachusetts D.E.P. shall be required by the City for Industrial Discharge into the sewer system.
- Industrial User Discharge Permit No. _____ Date _____

Comm. Mass. Sewer Conn./Ext. Permit No. _____ Date _____
A Filing and Inspection Fee of \$ 450, plus an Entrance Fee of \$ _____ where applicable, must accompany this application.

Bank# Costa Heritage Bank Check# 12834 Date 1-7-2020 Receipt# 2594884

Other requirements: _____

FOR INSPECTION ONLY A 24 HOUR
NOTICE IS REQUIRED AND THE
CONTRACTOR/APPLICANT IS
REQUIRED TO NOTIFY THE D.P.I.
@ 508 979-1550 Press 4 Repair

Connection made to Sewer Part of PERMIT EXPIRES 1 YEAR

Storm Drain

Applicant agrees to abide by the above terms, as well as all pertinent ordinances of the City of New Bedford, and such other special rules as the Commissioner of Public Infrastructure and/or City Engineer may deem necessary.

Michael H. Silva
City Engineer

Michael Supply Bldg
Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: _____

DATE: _____

COMMENTS: _____

APPROVED _____ DISAPPROVED _____

SIGNATURE

SKETCH PLAN



Department of Public Infrastructure

Jamie Ponte
Commissioner

Water
Wastewater
Highways
Engineering
Cemeteries
Park Maintenance
Forestry
Energy

CITY OF NEW BEDFORD

Jonathan F. Mitchell, Mayor

To Whom It May Concern:

I Heice Wilken Stelli, being
(Name) (Mailing Address)

Owner of property located at
121 Duvaline Boulevard, New Bedford, MA
Plot 133, Lot 21, hereby agree to allow Leo Sticker COBRA Enterprises
(Name)

P.O. Box 1046 Marshfield, to act on my behalf including affixing my
(Mailing Address) 02050

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: Street Closures

Name Heice Wilken
Signature

P.O. Box 1046 Marshfield Ma. 02050
Address

1-2-20 781-953-8158
Date Telephone Number