Date Issued: APRIL 9, 2021
VS/T: 1411606 # Slec gid
1505-FP # # # # # # # # # # # # # # # # # # #

APPLICATION / AGREEMENT

For DISTURBANCE PERMIT within the City of New Bedford

Hoisting Equipment License Number: HE 164313 Grade: AA Expiration Date: 3-16-30.33 Name & Contact Number of Insurer: PARTNERS INSUR.	Contact Name: Contact Name:
Excavator(s) Name: MIKE HTCLASH	Applicant Name: FARLAND CORP.
	Work will end (weather permitting) on: 4-16-3031
	Work will begin (weather permitting) on: 4-14-3031
	: solear at ate and
INE REPLACEMENT	Substantially as per plan annexed, for the purpose of:
	25915 # wass 421925
	Location of work: 67 ORLEANS STREET
roperty	Permission is herby requested to excavate the surface of: VELY P
	TO THE MAYOR AND CITY COUNCIL: DISTURBANCE PERMIT
ntil the work is completed. It is subject to inspection at all times.	This permit shall be posted at the work site, and shall remain u

	专家的	3 14 3 5 6 7 5 14 5 6 7		
	er in 177 til Frisk gjill fo			
	7.10			
	a de la compania del compania del compania de la compania del compania de la compania del compania de la compania de la compania de la compania de la compania del compania			
	Ball Place Transfer &	Lygnerick.	1 (1 (M) (1 (M))	
			The state of the s	
			Million Brown and State	
		1.000000000000000000000000000000000000	4 J 5 B 8	
	225	t Zanan		
		1975		
				g. 413; tap reamed
				OP POX: 017P N8M3N4 16gqrf0 cob. gaght: cvv :algh
				ptember 4, 2002 Renewed from new 8" main to property line ft, - 3/4" copper tubing; 1-3/4" curb stop; 1-caldwell
				- •Jl [•Ol esuoH entl & morl &
		10 00 00 00 00 00 00 00 00 00 00 00 00 0		- trom u line answers et
<u>rangan ang panggangan kan ka</u> Ng panggangan kan kan kan kan kan kan kan kan kan k		212.00		MEASURES, 5/8" H lead 10-11-41
		102.15.15		OMMER: Harry Robinson
KEW∳KKS	JI-JĀ	738	BIAQ .	FOCATION: N.W. Cor. 67 Orlens & Howleh
A a	CLEARE	dΔT :		APRLICATION: No.: 871925



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 1/4/2021

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 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).

Register Farland Corp. Inc.
Farland Corp. Inc.
Christian Farland
21 Ventura Drive
Dartmouth MA 02747 PRODUCER
Partners Insurance Group, LLC
560 Wilbur Avenue
Swansea MA 02777 FARLA-1 INSURER F INSURER D: INSURER B : Lloyd's of London PHONE (A/C, No. Ext): 508-491-3176 E-MAIL ADDRESS: MArruda@partn INSURER E : INSURER A: TRAVELERS INSURANCE COMPANY INSURER C: NAME: Maria Arruda MArruda@partnersinsgrpllc.com The Ohio Casualty Insurance Company NSURER(S) AFFORDING COVERAGE (A/C, No): 508-491-3108 24074 25682 NAIC#

COVERAGES

CERTIFICATE NUMBER: 742301561

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 POLICY EXP STANDARD MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

> \(\o \) ≻ Þ POLICY X PRO-ANY PROPRIETORPARTIMENTEX COUTIVE NO FROER MEMBER EXCLUDED?
(Mandatory in NH)
If yes, describe under DESCRIPTION OF OPERATIONS below DED RETENTION \$
WORKERS COMPENSATION
AND EMPLOYERS' LIABILITY AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS UMBRELLA LIAB HIRED AUTOS COMMERCIAL GENERAL LIABILITY

CLAIMS-MADE X OCCUR EXCESS LIAB ×× SCHEDULED AUTOS NON-OWNED AUTOS OCCUR CLAIMS-MADE N/A BMO57097682 HSAEC190032 4T-CO-6G656644-TCT-21 810-0P185896-21-2S-G UB-9J635485 1/1/2021 1/1/2021 1/1/2022 1/1/2022 Equipment Prof/Per CI & Aggreg BPP E.L. EACH ACCIDENT EACH OCCURRENCE E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 PROPERTY DAMÁGE (Peraccident) BODILY INJURY (Per accident) PERSONAL & ADV INJURY MED EXP (Any one person) EACH OCCURRENCE
DAMAGE TO RENTED
PREMISES (Ea occurrence) E.L. DISEASE - POLICY LIMIT | \$ 1,000,000 AGGREGATE BODILY INJURY (Per person) COMBINED SINGLE LIMIT PRODUCTS - COMP/OP AGG GENERAL AGGREGATE WC STATU-TORY LIMITS 뛾 \$ 1,000,000 \$ 2,000,000 \$ 10,000 \$ 1,000,000 \$ Included \$1,000,000 \$ 2,000,000 \$ 300,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required) CITY OF NEW BEDFORD AS ADDITIONAL INSURED-XCU COVERAGE INCLUDED

CERTIFICATE HOLDER

City of New Bedford 133 Williams St. New Bedford MA 2740

CANCELLATION

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

REPRESENTATIVE

듅

Commonwealth of Massachusetts
Division of Professional Licensure

Hojaing Phojinger

ExoS/ar/ac : eapires : 03/16/2023

Expires : 03/16/2023

France : 03/16/2023 StSdoi--Seligita Jaahom Baa ghalhaih 748 Tidon Taad HTRON HE-166212

Commissioner Layla R. Blindue

(DIG SAFE SYSTEM, INC - MA) 04/69/2621 11:52:39

-88 Ş ξ

*** INTERNET TICKET

***** REGULAR

TIME., 11:52 DATE..04/09/2021

REQUEST NO...20211417434

STATE......MASSACHUSETTS
MUNICIPALITY..NEW BEDFORD

ADDRESS..67

STREET...ORLEANS ST

NEAREST CROSS STREET 1..HARWICH ST

NATURE OF WORK..BROKEN.WATER LINE REPLACEMENT

EXTENT OF WORK
FROM CURB STOP IN SIDEWALK TO PRIVATE PROPERTY

AREA IS PREMARKED..YES

START DATE.....04/14/2021 START TIME..12:00

CALLER..... ..CHRISTIAN FARLAND

TITLE.....RETURN CALL...

PHONE #.... .508-717-3479

FAX #.....ALT. PHONE #... .774-991-5352

EMAIL ADDRESS...MATKINSON@FARLANDCORP.COM
CONTRACTOR.....FARLAND CORPORATION
ADDRESS......21 VENTURA DR

.DARTMOUTH

CITY......

ZIP......02747
EXCAVATOR DOING WORK..FARLAND CORPORATION