



214-2022

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

To the Mayor and City Council:

New Bedford, Mass: August 10, 2022

The undersigned respectfully requests permission to obstruct

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

359 Maple Street

for purpose of dumpster

Material of outside walls of building

Time provided in contract for completion of work ; if no contract, the estimated time required to complete the construction, rebuilding or repairs

Time for which space is applied August 12, 2022 - August 19, 2022

Space proposed to be obstructed in street or sidewalk:

Length 20 yards

Projection into sidewalk 0

Projection into roadway 5-6 ft 4-

Nature of obstructions dumpsters

Provisions made for travelers just opposite side of roadway

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

Company

Long Roofing LLC

Address

24 Walpole Park S, Unit 8

Walpole, MA 02081

Telephone #

240-473-1400

Consent of the Commissioner of Public Infrastructure

New Bedford, Mass.

August 10, 2022

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

Senior Manager

I suggest the following conditions be included in permit

Commissioner of Buildings



## CERTIFICATE OF LIABILITY INSURANCE

LONGFEN-04

DHARRIS

DATE (MM/DD/YYYY)  
1/7/2022

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 License # 0C36867

Lanham-Alliant Ins Svc Inc  
9901 Business Pkwy Ste B  
Lanham, MD 20706

CONTACT Danielle Harris

PHONE

(AC, No, Ext)

E-MAIL: danielle.harris@alliant.com

FAX

(AC, NO)

INSURER(S) AFFORDING COVERAGE

NAIC #

INSURED

Long Roofing LLC  
24 Walpole Park S Unit 8  
Walpole, MA 02081

INSURER A: Everest National Insurance Company

10120

INSURER B: Selective Insurance Company of America

12572

INSURER C: Burlington Insurance Company

23620

INSURER D: Chesapeake Employers' Insurance Company 11039

INSURER E: Crum &amp; Forster Specialty Insurance Company 44520

INSURER F:

## 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.

INSURER LTR	TYPE OF INSURANCE	AUTO SUBR (INSR, MOD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
<b>A</b>	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		CF4GL01198211	12/31/2021	12/31/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ex occurrence) \$ 100,000 MED EXP (Adv one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 EBL AGGREGATE \$ 2,000,000 COMBINED SINGLE LIMIT (Ex accident) \$ 1,000,000
<b>B</b>	AUTOMOBILE LIABILITY ANY AUTO <input type="checkbox"/> OWNED <input type="checkbox"/> AUTOS ONLY <input checked="" type="checkbox"/> HIRED <input type="checkbox"/> AUTOS ONLY <input type="checkbox"/> SCHEDULED <input checked="" type="checkbox"/> AUTOS <input type="checkbox"/> NON-OWNED <input type="checkbox"/> AUTOS ONLY		S 242806802	12/31/2021	12/31/2022	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
<b>C</b>	UMBRELLA LMB <input checked="" type="checkbox"/> EXCESS LMB <input type="checkbox"/> RETENTIONS <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE		6008E00525-02	12/31/2021	12/31/2022	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
<b>D</b>	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? <input type="checkbox"/> Y/N (Mandatory in NH) <input type="checkbox"/> N/A		8005584	1/1/2022	1/1/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH- ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
<b>E</b>	Pollution Liability		CPL-113887	12/31/2021	12/31/2022	1,000,000

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

## CERTIFICATE HOLDER

## CANCELLATION

City of New Bedford

133 William Street

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

Danielle Harris

ACORD 25 (2016/03)

The ACORD name and logo are registered marks of ACORD

© 1988-2015 ACORD CORPORATION. All rights reserved.