CITY OF NEW BEDFORD



APPLICATION FOR CONNECTION TO PUBLIC SANITARY SEWER AND/OR STORM DRAIN

perm1+21714

Date 2-24-87

Application No. Nº	21292	Date W		
The undersigned here	by requests permission to conne	ect a building sanitary and/or storm sewer from the		
premises located at ANTONIO L. COSTA AUG. 5.5. 300 to DE HEILMAN MELYILLE Assessors' Plot . 6.6.				
Lot 15.6., to the public	street c sanitary/storm sewer(s) in A	NTONIO L. COSTA AND		
		nd conditions set forth herein, and the ordinances		
of the City of New Bedfo	ord.			
	CITY OF NEW GEOFORD	Tol.		
	1 lease 11	Tel		
Owner's Mailing Address	SS: 14 EMMA ST	N, BED, MA, 02744		
		property owner, indicate that person's		
		Tel. 996-87(0		
Mailing Address: 30.6	HRAMAN MELVILLE C	SLOP		
and attach Letter of Aut	horization from Property Owner	hereto.		
		AYER MAKING INSTALLATION		
		Tel. 995-0554		
Address: 43.65	ACUSTRALY AUR.			
	JOINT MAINTENANCE AG	REEMENT RÊQUIRED		
If this connection is to	be part of a private service sha	red jointly with other building owners, attach copy		
of Recorded Joint Maint	tenance Agreement hereto.			
PERM	MITS TO INDUSTRIAL AND/O	R COMMERCIAL APPLICANTS		
the Commissioner of Po and quantity data, and o In addition, a valid In System Extension or Co	ublic Works of such supplement other pertinant information as he adustrial User Discharge Permi- nnection issued by the Common	cial Applicants only upon receipt and approval by ntal information, including drawings, composition e may require. It issued by the City, and a valid Permit for Sewer awealth of Massachusetts, Division of Water Polluto discharge industrial wastes to the City's sewer		
Industrial User Disch	arge Permit No	Date		
Comm. Mass. Sewer	Conn./Ext. Permit No	Date		
	TERM	IS .		
a) Type of Pipe Require	d: PVC SDR-3.			
		d where a 2 - pipe system exists in the street.		
c) All work must be insp	pected and approved by a D.P.V	V. Inspector, both in the street and on private prop-		
erty, before backfillin	ıg.			
d) A Filing and Inspecti	on Fee of \$ 5 , plus	s an Entrance Fee of \$ where appli-		
cable, must accompa				
		to Exist S.D. ID RASKHENT		
		as all pertinent ordinances of the City of New Bed-		
ford, and such other sp	ecial rules as the Commissioner	of Public Works may deem necessary.		
Commissione	Survey &	Michael Wear FOR SEACOAST Signature of Property Owner		
By Bill Bo	uchr,	By:		

Signature of Owner's Representative

Mr. John Lopes Mr. Joe Farias Luzo Welding, Inc. 14 Emma Street New Bedford, Massachusetts

TO: Department of Public Works

New Bedford City Hall

New Bedford, Massachusetts

DATE: February 6, 1987

We, John Lopes and Joe Farias, of Luzo Welding, Inc., do hereby authorize Michael Weaver, salesman for Seacoast Construction Corp., to sign on our behalf for the sewer entry permit.

Sincerely,

Co-Owner

Luzo Welding, Inc.

Suzo Welding, Inc.

MDW:tjh

Permit No. 21292

DEPARTMENT OF PUBLIC WORKS

Supplementary Information Required from Commercial or Industrial Firms in Addition to Issuance of Sewer Entrance Permit

, A.	Architect's floor plan showing proposed connections to building drain (inside building):		
В.	Architect's detail drawings of any pretreatment or equalization equipment:		
C.	Site pla	in showing:	
	(1) (2) (3) (4) (5)	Building and location of building sewer Proposed connection to public sewer Profile of building sewer Plan and profile of storm drain Location of control manhole (Standard type — preferably between property line and public sewer.)	
D.	Wastev	vater Information: Date: 2/12/87	
	(1)	Name of firm: LUZO WELDING	
	(2)	Address AUTONIO COSTA AVE.	
	(3)	Name and title of person completing form. (company representative): MICHAEL WEAUER CHIEF ESTIMATOR	
	(4)	Industry type (SIC Number): \mathcal{N}/\mathcal{A}	
R P	(5)	Number of Employees:	
Re-S.	(6)	Principal products manufactured, produced, processed or sold:	
3,4		MANUFACTURED WELDING SHOP	
3 1	(7)	Sources of water supply: Municipal	
0.00	(8)	Estimated volume of water to be used per day: 60 gallons.	
	(9)	Flow gauges in plant N/A influent effluent.	
0.	(10)	Water consumed in processes: NA %.	
i	(11)	Recycled water: N/A %.	
	(12)	Cooling water: NA %.	
000-1	(13)	Number of operating days per week:	
Ž	(14)	Number of shifts per day:	
0	(15)	Type of discharge: batch.	
	(16)	If batch per shift.	
3	(17)	Estimated volume of wastewater discharged daily gallons.	
4	(18)	Wastewater abatement practices to be used:	
SRWAGE	(10)	(a) Process changes: N/A	
S		(a) Troccis changes among the control of the contro	
19		(b) Changes in raw materials: ν/A	
SAPITARY		(c) Recycling methods: N/A	
\$	The second second second	(d) Wastewater treatment equipment: N/A	
		(e) Monitoring devices: W/A	
		(f) Sampling and testing procedures: N/A	
	(19)	(a) pH	
	(90)	(c) COD WA mg/1 (f) Color W/A mg/1	

Date

Signature of Property Owner