

## CITY OF NEW BEDFORD

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

Application No. Nº 21684	Date 9//3/88
The undersigned hereby requests permission to connect a building sanitary and/or storm sewer from the premises located at \( \frac{113}{5} \). \( \frac{143'\frac{1}{5}}{5} \). \( \frac{120'\frac{1}{5}}{5} \). \( \frac{120'\frac{1}{	
of the City of New Bedford.	aran is b
Name of Property Owner: . Campbell . Custociates	Tel. 9992162
Owner's Mailing Address: P.O. Box 34, So. Dark MA 02748	
If application is being submitted by other than actual property owner, indicate that person's	
Name:	
Mailing Address:	
and attach Letter of Authorization from Property Owner hereto.	
Name: Flank Colp.  Address: 4385 accushout auc. 10.B.	NSTALLATION Tel. 993-6500
JOINT MAINTENANCE AGREEMENT RÉQU	
If this connection is to be part of a private service shared jointly with other	ner building owners, attach copy
of Recorded Joint Maintenance Agreement hereto.	
PERMITS TO INDUSTRIAL AND/OR COMMERCIAL	APPLICANTS
Permits can be issued to Industrial and/or Commercial Applicants only upon receipt and approval by the Commissioner of Public Works of such supplemental information, including drawings, composition and quantity data, and other pertinant information as he may require.  In addition, a valid Industrial User Discharge Permit issued by the City, and a valid Permit for Sewer System Extension or Connection issued by the Commonwealth of Massachusetts, Division of Water Pollution Control, shall be required for applicants wishing to discharge industrial wastes to the City's sewer system.	
Industrial User Discharge Permit No.	Date
Comm. Mass. Sewer Conn./Ext. Permit No.	Date
a) Type of Pipe Required: PUC 3DZ-35	
b) Separate Sanitary and Storm connections are required where a 2 - pipe	system exists in the street.
c) All work must be inspected and approved by a D.P.W. Inspector, both is	
erty, before backfilling.	
d) A Filing and Inspection Fee of \$ . 50. (c), plus an Entrance Fee	of \$ where appli-
cable must accompany this application	
e) Other requirements: M. D. Dr. Ly - Connect to Wyl at 143 Olyoft & Of M. H. Frank Conp. to docule Applicant agrees to abide by the above terms, as well as all pertinent ordinances of the City of New Bed-	
ford, and such other special rules as the Commissioner of Public Works n	
Commissioner of Public Works	cignature of Property Owner
By: Susan Harris By:	

Signature of Owner's Representative