



CITY OF NEW BEDFORD

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

Application No. N^o 21968

Date JAN. 16, 1990.

The undersigned hereby requests permission to connect a building sanitary and/or storm sewer from the premises located at VICTORIA ST. (NS.) 334' E. W. of ASHLEY BLVD., Assessors' Plot 130.8 Lot 953, to the public sanitary/storm sewer(s) in VICTORIA ST. Street; the same to be installed in accordance with the terms and conditions set forth herein, and the ordinances of the City of New Bedford.

Name of Property Owner: ALBERTO RAPOSO, Please Print Tel. 997-7572

Owner's Mailing Address: 121 HATHAWAY RD. NB. 02746

If application is being submitted by other than actual property owner, indicate that person's

Name: Tel.

Mailing Address:

and attach Letter of Authorization from Property Owner hereto.

BONDED CONTRACTOR OR DRAIN LAYER MAKING INSTALLATION

Name: B. L. & SON, Tel.

Address: 46 QUANAPOAG RD. E. FREETOWN, MA.

JOINT MAINTENANCE AGREEMENT REQUIRED

If this connection is to be part of a private service shared jointly with other 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 pertinent 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

TERMS

a) Type of Pipe Required: PVC. SDR 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 in the street and on private property, before backfilling.

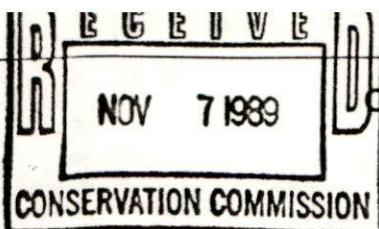
d) A Filing and Inspection Fee of \$ 50.00, plus an Entrance Fee of \$ where applicable, must accompany this application.

e) Other requirements: INSP. ONLY - CONNECT TO 10" Sewer Line ON CENTER OF STREET.

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 Works may deem necessary.

Lawrence J. Worden (mg) ACT. Commissioner of Public Works Albert Raposo Signature of Property Owner

By: Mario S. James By: Signature of Owner's Representative



City of New Bedford, Massachusetts
Building Department
Application for Building Permit
Department/Commission Review

FOR BUILDING DEPT. USE

	BY	DATE
Received	_____	_____
Reviewed	_____	_____
Reviewed	_____	_____

The attached Application for Building Permit has been submitted to the Building Department and is requested for the following

location: 130 B PLOT 953 LOT NO VICTORIA ST STREET

By: ALBERTO RAPOSO APPLICANT on behalf of the owner SAME NAME

Due to the type of construction proposed by this application, the Building Commissioner has determined that this Application for Building Permit should be reviewed by the departments and/or commissions indicated below. Plans and specifications accompanying this Application are available for review in the Building Department. After you have reviewed this Application and the submitted building plans, please provide your comments in the space provided below attaching additional information as necessary and return this form to the Building Department no later than _____, 19____

This review form must be signed by a person authorized to conduct the review on behalf of your department or commission.

REVIEW REQUESTED BY FOLLOWING CITY DEPARTMENTS AND COMMISSIONS

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Airport Commission | <input type="checkbox"/> Fire Department | <input type="checkbox"/> Historical Commission | <input type="checkbox"/> Treasurer's Office |
| <input checked="" type="checkbox"/> Conservation Commission | <input type="checkbox"/> Harbor Development Commission | <input type="checkbox"/> Park Department | <input type="checkbox"/> Water Department |
| <input type="checkbox"/> Department Public Works | <input type="checkbox"/> Health Department | <input type="checkbox"/> Planning Department | <input type="checkbox"/> Wire Department |
| <input type="checkbox"/> Other _____ | | | |

DEPARTMENT/COMMISSION REVIEW COMMENTS

Reviewed submitted building plans: ☐ yes ☐ no

COMMENTS:

☐ Additional information attached

RECOMMENDED ACTION

Recommend building permit be ☒ approved ☐ rejected ☐ approved conditionally

CONDITIONS: this is the 3rd application of approval.

If recommendation of permit rejection is made, cite specific reasons and pertinent law:

Reviewed by Ron Fortin Department/Commission Conservation Date 11-13-89
authorized representative